HEARING ON H.R. 3876, H.R. 4792, H.R. 4694, AND H.R. 4625

HEARING

BEFORE THE

SUBCOMMITTEE ON
HOSPITALS AND HEALTH CARE

OF THE

COMMITTEE ON VETERANS' AFFAIRS
HOUSE OF REPRESENTATIVES

NINETY-EIGHTH CONGRESS

SECOND SESSION

MARCH 7, 1984

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HEARING ON H.R. 3876, H.R. 4792, AND H.R. 4625

WEDNESDAY, MARCH 7, 1984

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON HOSPITALS AND HEALTH CARE,
COMMITTEE ON VETERANS' AFFAIRS,
Washington, D.C.

The subcommittee met, pursuant to notice, at 9:07 a.m., in room 334, Cannon House Office Building, Hon. Bob Edgar (chairman of the subcommittee) presiding.

Present: Representatives Edgar, Mica, Evans, Kaptur, Staggers, Rowland, Slattery, Hammerschmidt, Hillis, Solomon, McEwen, and Johnson.

OPENING STATEMENT OF CHAIRMAN EDGAR

Mr. EDGAR. Good morning, the Subcommittee on Hospitals and Health Care will come to order. This is our first legislative hearing for the second session of the 98th Congress. Last year we held oversight hearings into the quality and quantity of health care delivered by the Veterans' Administration in the six medical regions which make up the VA's health care system.

During those hearings, we became aware of many outstanding medical services which are being provided to our Nation's veterans. We also learned of several problems which inhibit the VA's health care professionals in providing the quality as well as the quantity of medical treatment and care that was intended by the Congress.

Most of the remedies to correct these problems include additional funding. Hopefully, some additional funds will be made available during the full committee's markup of our recommendations for fiscal year 1985's budget to the Committee on the Budget tomorrow.

Some of the problems can be resolved by enacting legislation to amend current law and practices. Today we will receive testimony on four bills, three of which I introduced and one which I cosponsored with my good friend and colleague, the Hon. Dan Mica of Florida.

Two of the measures we are considering today, H.R. 3876 and H.R. 4792, will have a far-reaching impact if enacted. H.R. 3876 will authorize the VA to provide drugs and medicines prescribed by a private physician to veterans for the treatment of their compensable service-connected disabilities. Up until last summer, the VA provided this service. Then, the VA General Counsel rendered an

opinion that it was not in accordance with law. For many years, we had a situation where eligible veterans elected to receive treatment at their own expense and the VA provided drugs and medicine. In a way, this choice saved the VA money by avoiding the cost of treatment.

Since the general counsel issued his opinion, an eligible service-connected disabled veteran who desires to continue receiving drugs and medicines to which the law says he is entitled has to receive his medical treatment from VA doctors. The net effect is one of increasing the demand for VA treatment and care when the VA is unable to meet the current demand. We believe our bill will save money in the long run.

We will also hear testimony on H.R. 4792, which is cosponsored by the chairman of the full committee. This is the third hearing the subcommittee has held on the topic of security at VA medical center's since 1981. Quite frankly, we are puzzled at why the VA has been unable to convince the Office of Personnel Management that there is a need to change the way VA police officers are paid. H.R. 4792 requires the Administrator to come up with a plan for implementing within 90 days after the date of enactment. There is a need for reform here and we have given the internal administrative process a chance to remedy the situation and it hasn't worked. So I believe that Congress must act to insure the safety of medical center visitors and employees.

The other two measures we are considering today are H.R. 4694 and H.R. 4625. H.R. 4694 would allow certain retired military physicians to work for the Veterans' Administration without waiving their earned retirement pay. Authority similar to this was contained in the Civil Service Reform Act of 1978. H.R. 4694 would merely continue that authority which expired earlier this year.

H.R. 4625 is a measure recommended by the GAO to cover a situation where Congress enacts an appropriation measure more than 45 days prior to the beginning of the fiscal year. Present law did not envision the efficiency which marked the action on the VA's 1984 Appropriation Act, so that GAO was in a position of having to report on something that had not occurred. H.R. 4625 is a technical amendment which will allow the necessary time for OMB to provide the VA with the funds appropriated to employ the number of persons specified in an appropriations act and for GAO to certify that this has taken place.

I would now like to recognize the ranking minority member of the subcommittee, Hon. John Paul Hammerschmidt.

STATEMENT OF HON. JOHN PAUL HAMMERSCHMIDT, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF ARKANSAS

Mr. HAMMERSCHMIDT. Thank you, Mr. Chairman. As you have observed in your opening statement, in our travels around the country visiting and observing Veterans' Administration medical centers, we have often been told of the security problems that exist in many metropolitan hospitals. Low morale, high turnover, employee dissatisfaction, patient concern and difficulty in recruitment are commonplace in a number of VA hospitals in metropolitan

areas. This has caused the attendant problems of training new employees and the high costs associated with that training.

Under these circumstances, Mr. Chairman, I think the hearing today on this subject is very timely and I congratulate you for scheduling it.

Mr. Chairman, I might add that this problem of security is not with the VA alone. It also exists in other big city hospitals. However, it has been my feeling that VA security employees' pay and other benefits in these areas often lags considerably behind those of other medical facilities.

Mr. Chairman, the Office of Personnel Management has been studying this matter for a long time. However, I understand that that effort has now been suspended. It is my view that congressional action may well be needed and, to that end, I will join with you in seeking a legislative remedy to this very complex problem.

Briefly on another matter, Mr. Chairman, service-connected veterans have always been those with the highest priority in the Congress. The problem of a lack of legal authorization for VA to fill prescriptions for such veterans when those prescriptions have been written by a non-VA doctor was recently brought to light.

These veterans already pay for their treatment by private physicians. They do this for several reasons, including wanting their own family doctor for personal convenience, preference for nighttime or weekend treatment, and sometimes because of travel distances to VA facilities. I would hope that we can explore this problem and, if appropriate, find a legislative way to have the VA fill the prescriptions of these private doctors as it did before the legal issue arose. I would also expect that if we legislate in this area that the VA would establish necessary controls, including periodic reviews of each case to assure that abuses do not take place.

Mr. Chairman, as you have said, the other two matters before us are also important. I look forward to working with you with respect to them. Thank you, Mr. Chairman.

Mr. EDGAR. Thank you. I would now like to call on my colleague, Dan Mica, for an opening statement.

OPENING STATEMENT OF HON. DAN MICA, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF FLORIDA

Mr. MICA. Mr. Cnairman, I will not take too much time of the committee, but I would like to talk about the legislation that has just been mentioned, H.R. 3876. I simply would like to point out that I think the VA, in opposing this, may not be taking into account the effects of what the present situation is.

We have veterans who are willing to pay money out of their own pocket, large numbers of veterans, to go to a doctor to receive a prescription to try to, in effect, meet their own needs and, hopefully, save a little money for the Veterans' Administration and then be told that they can't take it to the VA pharmacy to have that filled.

What we are doing—and this may be the only case in the years that I have been on the Veterans' Committee—is actually encouraging utilization of VA physicians. I would like to be corrected by any member of the committee if I am wrong on this, but probably

the single highest cost for any personnel in the VA system is for physicians. We are encouraging the use of VA physicians by veterans who, of their own will, use a private physician and pay that fee. Not only do I think that that is inappropriate with an already overburdened system, but it's almost disastrous in a situation such as we have in growth States like Florida, where we have such tremendous growth, and, of course, California, Texas, and many of the States where the services and facilities are pressed to the maximum.

So, when they say that it would cost $7 million for drugs, I don't think there is any correlation to the cost to the VA and the impact on services when you tell a veteran, "You must come in and see a VA doctor in order to get this prescription," when, in effect, he would just as soon pay out of his own pocket to his own doctor, get the prescription and bring it in and have it filled by the VA.

The bill has 65 cosponsors. The subcommittee chairman here is cosponsoring it and I think almost every member of the committee who has been presented with an opportunity, and they all will be, has signed on. The chairman of the committee has signed on. There is virtually no opposition anywhere in the country among any veterans organization, anyplace except within the VA. I would ask, with due respect, because I think you understand that we have tried to work together on these things, that you reassess your position on this, that, in fact, if you think about the time it takes from physicians to see these; it may well equal out to a savings, not a cost of $7 million. We can't calculate it here at the committee, but you may be able to calculate it and it could be very helpful for all of us, not to mention, the service it would provide the veterans.

So I would appreciate your reconsideration. I can almost guarantee that this committee will virtually unanimously approve this legislation at the subcommittee level, at the full committee level, and I see no opposition on the floor of the House. So if the VA could, in its wisdom, and in light of reality, think a little bit more about the approach on this, it would be most helpful to us.

Finally, I would like to note that I have just been informed here by staff this morning that up at the Bethesda Naval Pharmacy, that Defense Department pharmacies will fill prescriptions written by private physicians for certain CHAMPUS patients. So, if indeed this is already being done to some degree, whatever degree, it's obviously a precedent, it obviously was done before and we are responding to a concern that, I think, has been expressed not just in Florida, which incidentally is severely impacted, as you know, but a concern that has been expressed nationwide.

I will take no more time. I thank you very much, Mr. Chairman. I appreciate the committee's time.

Mr. EDGAR. Thank you. I might mention just for the record that I have requested of the chairman of the full committee to include in the budget submission tomorrow funds that would be equal to covering the cost of this legislation so that I hope all of you will come tomorrow and look at that budget carefully. There were additional commitments made over and above what the President was looking for and over and above what the VA had been able to ask for. In our particular area, I think we raised the funds about $28 million. I would like to have each of you take a look at those in-

creases. They are not stuffing the budget with funds, they are streamlined requests that grew out of our visits across the country, including the concern that you have raised.

Are there other opening statements?

[No response.]

Mr. EDGAR. I would like to call as our first witness, Dr. Custis. I wanted to indicate to him that we called him today because we wanted him to know that we weren't giving him up for Lent [laughter] and we would like him to come to the witness table at this time.

Dr. Custis, welcome to our hearing this morning. As soon as you get settled there, it would be helpful if you could introduce all of the people at the table with you and identify them for the record. I would also like to indicate that the full text of your statement and that of anyone else in the panel, will be made a part of the full record.[1] We ask you to proceed as you wish. Dr. Custis.

STATEMENT OF DR. DONALD L. CUSTIS, CHIEF MEDICAL DIRECTOR, VETERANS' ADMINISTRATION, ACCOMPANIED BY MARJORIE R. QUANDT, ASSISTANT CHIEF MEDICAL DIRECTOR, OFFICE OF ADMINISTRATION; JAMES G. FASONE, DIRECTOR, SECURITY SERVICE; THOMAS PRICE, MANAGEMENT OPERATIONS STAFF CHIEF, MANAGEMENT SUPPORT OFFICE; AND JOHN MURPHY, GENERAL COUNSEL, VETERANS' ADMINISTRATION

Dr. CUSTIS. Thank you, Mr. Chairman. It's a pleasure to be here again. With me at the table are Mr. Jack Price for the purpose of addressing physicians' pay and personnel issues in our security force; Ms. Marjorie Quandt, Jim Fasone, the Director of our Security Service; and Mr. John Murphy, our General Counsel.

We appreciate, Mr. Chairman, the opportunity to appear before the subcommittee this morning to offer our views on the four bills pending before the subcommittee. H.R. 3876 would authorize the VA to provide drugs to service-connected veterans who are not using our fee program and who choose not to obtain their health care from the VA hospital. We are currently authorized to provide drugs and medicines prescribed by private and non-VA physicians to veterans who are receiving increased compensation or pension, because they are permanently housebound or in need of regular aid and attendance.

This authority was intended to alleviate the severe inconvenience that would be imposed on such veterans, if they were required to travel to the VA facility to receive services. At the time that this authority was enacted, many nonservice-connected veterans could not obtain VA health care services because of their disability.

H.R. 3876 would expand both the scope and the intent of this authority to allow the VA to provide such privately prescribed drugs and medicines to veterans for treatment of compensably rated service-connected disabilities. We cannot support enactment of H.R. 3876.

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[1] See pp. 69 and 72.

Mr. Chairman, we at the VA attempt to provide veterans, particularly service-connected veterans, with complete hospital and medical services. This proposal would encourage some veterans who do not choose to avail themselves of VA medical care to use the VA solely as a pharmacy. If VA is required to fill privately written prescriptions for all veterans for compensably rated service-connected disabilities, it would seem logical to also provide those veterans with other services ordered by private physicians, such as X-rays, laboratory studies and other diagnostic tests.

We feel that establishing a VA role as a mere provider of ancillary medical services would be a fundamental and unwarranted departure from the longstanding, congressionally mandated principle that VA should provide eligible veterans with all necessary care and treatment.

Mr. Chairman, this proposal is suggestive of the concept whereby the VA would be relegated to a role of merely financing the provisions of health care as opposed to being a direct provider of services.

Finally, Mr. Chairman, if this proposal is enacted, it will be necessary for VA to verify that prescriptions submitted to VA for filling are actually written for treatment of service-connected disabilities. This will complicate administration of the pharmacy program and will require greater resources than are now necessary.

Parenthetically, Mr. Chairman, I think this situation is not to be compared to that under CHAMPUS, whereby the military provides drugs prescribed by doctors authorized in CHAMPUS. As a matter of fact, we have the same provision in the VA's CHAMPVA program. Like fee-basis care also our CHAMPVA program covers the cost of prescriptions. That is not what we are talking about in this proposal.

Mr. Chairman, H.R. 4694 would give VA authority to grant waivers to the mandatory reductions in retired or retainer pay of certain retired military officers recruited by the VA as doctors of medicine or osteopathy. The title V authority to grant such waivers expired this January. We strongly support the enactment of this bill with modifications suggested in my formal statement.

Currently the retired and retainer pay of most retired military officers recruited to work for the VA is subject to reduction in accord with title V, United States Code. These mandatory reductions attaching to Federal employment make employment in the private sector where no reduction in retired or retainer pay occurs much more attractive and impairs our ability to recruit physicians in selected specialties or in remote geographic locations. Before the expiration of the authority in January of this year, the VA granted exceptions for just 26 appointments to key positions involving critical mission requirements. Under these delegations exceptions were only approved when the appointee was in a scarce medical specialty, was being considered for a senior management position, or when there was a severe recruitment retention problem in filling a particular position.

If this legislation is approved, we will continue to prudently use this waiver authority.

Mr. Chairman, H.R. 4792 proposes to amend section 218 of title 38 to strengthen security operations in the Department of Medicine

and Surgery. We are in strong agreement with the intent of this bill and favor its major provisions. My formal testimony addresses each provision of the bill so I will not repeat a full analysis. At your request, we have with us Mr. Jim Fasone, Director of the Security Service as well as our four regional security officers. Mr. Fasone will testify to the concerns that he has for maintaining adequate security of our VA medical facilities, property and personnel and will introduce the regional security officers.

For some years, we have been concerned that in some locations we are not able to retain a highly qualified police force. The principal problem in the recruitment and retention of highly qualified personnel is our inability to pay competitive rates, particularly in certain geographic areas. This is evidenced by relatively high police officer turnover rates in these areas.

The bill proposes to resolve the problem by requiring the Administrator to issue standards for classifying and grading VA police officers and authorizing the Administrator to increase rates of basic pay authorized for persons in such grades and classes. We do not believe it is necessary or appropriate to remove VA police officers from the title V grading and classification system. The problem is money, and although it is a widespread problem, it is not universal. We need a more flexible remedy to focus our attention on the pay disadvantage that exists in certain markets.

I would recommend expanding the authority of section 4107(g) of title 38 that is already in place for recruiting and retaining title V health care personnel.

Mr. Chairman, H.R. 4625 makes a technical amendment to existing law regarding the date by which the GAO must submit a report concerning VA personnel ceilings to the appropriate committees of the Congress. Enactment of the bill would have no impact on the VA and we, therefore, defer to the views of the GAO on the bill.

Mr. Chairman, this concludes my statement. We will be pleased to answer any questions you or the members of the subcommittee might have.

Mr. EDGAR. Thank you, Dr. Custis. Mr. Fasone, do you have a statement that you would like to provide for the record?

Mr. FASONE. Yes, Mr. Chairman.

Mr. EDGAR. You may proceed at this time.

STATEMENT OF JAMES G. FASONE, DEPARTMENT OF MEDICINE AND SURGERY, VETERANS' ADMINISTRATION

Mr. FASONE. Mr. Chairman and members of the subcommittee, I appreciate this opportunity to testify before the subcommittee regarding the Department of Medicine and Surgery Security and Law Enforcement Program. At your request, our four regional security officers are here today and I would like to introduce them.

To my right rear is Mr. Paul Gately, of Boston. To my left here is Mr. Enos from California, Mr. Furr of Little Rock, Ark., and Mr. Cappello out of Indiana.

Before I begin, sir, I would like to reiterate what is contained in Dr. Custis' testimony concerning the fact that the entire issue of training police officers using firearms in the conduct of Govern-

ment law enforcement efforts, in general, is an important issue which must be coordinated throughout the Federal Government.

In view of this new Federal initiative to improve the regulation of firearm authorization and training, I would like to briefly digress from my prepared statement to bring to the committee's attention a unique achievement of our security and law enforcement program relating to the subject of firearms and weapons in our health care environment.

Despite authority to issue firearms to our police officers granted in legislation in 1973, only five special investigators are authorized to bear firearms while on assignments anticipated to involve serious criminal danger. Otherwise, we have reserved this authority for use during national emergencies, when the nature of the threat to our medical centers and our vulnerabilities can suddenly change.

In place of firearms, we have adopted the nonlethal and noninjurious chemical mace projector weapon, with a measure of success I can only describe as extraordinary. In the 11 years since its adoption and our strict adherence to a clear and simple training requirement to fair rules of engagement, and to a prompt reporting requirement following each weapon use, this weapon has been employed in 965 serious, life-threatening situations in our medical centers.

The analysis of each firing report received reflects that circumstances existed in one-third of these 965 incidents which would have clearly justified the use of firearms by universal police firearm standards. However, lacking firearms, the VA police officers involved successfully overcame offenders brandishing knives, guns, and other weapons, with their nonlethal, but incapacitating weapons and the killing action of firearms was averted.

I think it is highly significant that as many as 300 lives were perhaps spared by our weapon policy. I bring this achievement by our medical center police officers to the committee's attention so that it may appear in the record as a tribute to the courage of our police officers, of which we are very proud and thankful.

Our medical centers in many areas of the country continue to experience a high degree of difficulty in the recruitment and retention of well-qualified police officers. We have a total of 1,975 police officer positions at 172 medical centers. For fiscal year 1979 to the present, over 3,100 officers have joined and then left the security service. This turbulence causes undeniably lowered efficiency, wasted training, periods of vulnerability, and additional administrative costs.

Although there are many reasons why employees leave their jobs, it is our view that a major factor has been the difficulty we have had in centers located in areas in competition with private and governmental police agencies, in surrounding communities, for officers who are able to meet our standards of performance. Entry level salaries for untrained police and deputy sheriff recruits offered by 142 nationwide agencies serving communities with populations of under 10,000 persons, provide a clear insight into our compensation problem.

The average annual wage offered to untrained recruits by these small communities is $14,368. In contrast, the VA is normally lim-

ited to an entry level of $12,367 in recruiting police officers with 2 years' prior police experience or substitute education at the college level.

A copy of the survey reporting these figures is submitted for possible inclusion in the record.

[Subsequently, the Veterans' Administration furnished the following information:]

Excerpts of the Fraternal Order of Police publication, "A Survey of 1983 Salaries and Working Conditions of the Police Departments in the United States," March 15, 1983, pages 46, 48, 50, 52 and 54. These excerpted pages describe minimum patrolman salary and working conditions of police departments serving populations under 10,000. This material follows:

FRATERNAL ORDER OF POLICE

NATIONAL LODGE
THE ONLY NATIONAL POLICE ORGANIZATION

32nd EDITION

A SURVEY OF **1983**
SALARIES AND WORKING CONDITIONS OF THE
POLICE DEPARTMENTS IN THE UNITED STATES

Published March 15, 1983

	No. of Uniformed Police & Detectives	CHIEF		CAPTAIN		LIEUTENANT		SERGEANT		DETECTIVE		PATROLMAN			Hours Per Week	Overtime Compensation	Number of Paid Holidays Rate of Pay	Personal Days	Annual Vacation (Days Min - Max)	Annual Sick Leave (days) Maximum Accumulation	Sick Leave Buyback	Shift Differential (evening/night)	Annual Clothing Allowance	Clothing Maintenance
		MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	Years Min to Max										
POPULATION 10,000 to 25,000 (Continued)																								
Westerly, RI	31	–	30,600	–	28,400	–	26,800	–	25,695	20,485	25,312	12,017	23,924	8	37½	Y	14/2	–	14-35	12/100	–	–	$400	–
*Western Springs, IL	16	–	37,128	–	–	23,280	31,642	21,138	28,444	–	–	18,044	24,284	10	40	Y	7/X	1	10-25	12/240	33⅓%	–	——($300)——	
West Lafayette, IN	28	22,306	–	19,103	19,522	18,430	–	17,758	18,130	18,130	19,103	15,270	17,061	1	40	N	–/1	1	10-25	–	–	–	$400	–
*Whitefish Bay, WI	18	–	31,200	–	–	26,052	27,964	24,068	25,860	24,288	25,644	20,244	23,676	4	38¾	Y	10/11½	2	10-25	12/120	25%	–	$195	–
Whitehall Twp., PA	38	–	29,602	–	26,312	–	25,438	–	24,481	–	24,481	13,062	22,339	3	40	Y	10/11½	3	5-30	90/90	–	25	$325	–
*Whitman, MA	21	–	–	28,000	–	18,725	–	17,725	–	–	–	15,425	16,325	3	37½	Y	11/X	1	14-28	UNL	–	$2	$275	–
*Wickliffe, OH	29	–	33,811	–	30,837	–	28,135	–	25,676	–	23,442	21,053	23,442	2	40	Y	10/1	1	10-25	UNL	–	.35/.50	$425	–
*Williamstown, NJ	38	–	27,000	–	26,000	–	24,000	–	22,701	–	21,870	17,000	21,370	1	40	Y	13/2	2	12-30	15/UNL	75%	–	UNL	$350
Willmar, MN	22	–	–	–	–	–	–	22,404	23,880	21,924	22,356	19,092	21,924	5	40	Y	9/X	–	10-21	12/120	75%	–	$325	–
Willowick, OH	X	–	33,500	–	–	26,880	–	24,432	–	–	–	17,736	22,212	3	40	Y	11/1	2	14-35	15/130	100%	–	$520	–
Wilmington, OH	17	19,073	23,212	–	–	–	–	15,724	19,073	15,724	19,073	14,248	17,326	5	40	Y	9/1	2	10-25	14/UNL	75%	–	$300	$175
*Winchester, VA	43	24,256	30,987	18,998	24,256	17,222	22,013	15,633	19,956	13,587	17,222	12,221	15,633	X	40	Y	10/1	–	12-18	12/–	–	–	$300	–
*Winter Haven, FL	X	–	–	16,987	21,680	14,675	17,836	13,976	17,836	13,311	16,987	12,677	16,178	VAR	40	Y	6/1½	3	12-21	12/X	25%	–	$200	$250
*Winter Park, FL	61	25,043	35,568	19,115	26,624	17,763	24,710	16,494	22,963	14,913	20,800	14,913	20,800	7	40	Y	7/1	–	10-20	15/130	–	–	$400	$150
Xenia, OH	37	27,846	30,751	–	–	23,980	26,514	20,682	22,844	13,570	18,753	13,570	18,753	5	40	Y	9/1½	–	12-24	15/160	33%	–	$250	–
*Yarmouth, MA	42	32,000	–	–	–	20,525	21,551	18,883	19,827	17,641	–	13,057	17,241	5	40	Y	11/1	–	10-20	12/120	–	$20	$300	–
*Yuba City, CA	31	–	36,036	–	–	25,381	30,543	21,923	26,438	21,532	26,038	18,924	22,827	3½	40	Y	11/1½	–	12-22	12/–	50%	–	$300	–
*Zion, IL	36	–	34,000	–	–	–	30,324	–	25,512	–	22,536	17,808	22,536	4	40	Y	8/1	2	10-20	12/120	–	–	$350	$150
POPULATION UNDER 10,000																								
Alexandria, IN	10	–	16,475	–	14,978	–	–	–	–	–	–	13,647	14,476	1	40	N	6/1	–	14-28	–	–	–	$800	–
Ambler, PA	X	–	27,839	–	–	–	–	–	24,017	–	–	17,476	23,132	2	40	Y	10/11½	3	10-25	10/–	–	–	–	–
Arnold, PA	10	–	22,421	–	–	–	–	–	20,149	–	–	17,849	19,849	25	40	Y	11/1	–	14-30	90/–	–	–	$250	$125
Ashland, WI	19	–	22,000	–	–	–	–	–	18,641	–	18,641	17,656	17,656	–	40	Y	10/11½	X	12-25	12/120	X	Y	$275	Y
Audubon, NJ	17	–	27,684	–	23,523	–	–	–	21,315	–	–	16,728	20,343	4	40	Y	15/X	–	10-25	–	–	–	$350	–
Bangor, PA	8	19,000	–	–	–	–	–	17,957	–	–	–	14,957	–	–	40	Y	10/11½	–	7-28	–	–	–	–	ALL
Bath, PA	9	18,800	–	–	–	15,535	–	–	–	–	–	12,305	–	–	40	Y	7/11½	3	5-20	(130)	–	–	FULL	–
Baltesville, IN	5	–	16,250	–	–	–	15,200	–	–	–	–	12,050	14,050	1	46	Y	2/X	–	6-18	8/X	–	X	–	–
Bellevue, OH	12	17,430	22,068	–	18,990	–	–	–	18,616	–	18,616	17,201	18,283	2	40	Y	13/1½	1	10-25	X/UNL	50%	$350	–	X
*Berkeley, IL	12	25,000	–	24,946	–	23,441	–	21,937	–	–	–	19,172	20,433	1	40	Y	7/1	2	10-29	12/60	–	–	–	$300
Beverly Shores, In	7	15,000	18,500	13,500	16,000	–	–	–	–	–	–	12,000	14,500	3	40	N	7/1	3	15-30	7/7	–	–	$200	–
Birdsboro, PA	5	–	20,634	–	–	–	–	–	19,573	–	–	12,000	18,762	3	40	Y	8/1½	2	5-20	12/120	100%	–	100%	100%
Blossburg, PA	3	17,200	17,700	–	–	–	–	–	–	–	–	11,500	13,200	1½	40	Y	12/1	2	5-15	7/–	–	–	$300	$75
Bluffton, IN	16	18,902	–	18,144	–	–	–	15,123	–	18,144	–	13,610	14,297	1	40	Y	11/1	6	5-20	X	X	19/.43	$600	–
Bourbon, IN	3	–	17,940	–	–	–	–	–	–	–	–	15,000	17,000	1	46	N	8/1	–	7-21	14/14	–	–	$350	–
Braddock, PA	7	18,530	–	–	–	17,570	–	17,250	–	–	–	10,500	16,850	5	40	Y	9/1	–	10-25	10/70	100%	–	$300	X
Brazil, IN	13	12,881	14,881	12,452	14,452	–	–	12,023	14,003	–	–	11,451	13,451	20	40	Y	7/2	VAR	14-35	12/60	–	–	$600	$250
Bremen, IN	8	20,979	–	–	–	–	–	16,357	–	16,357	–	15,578	–	–	40	N	10/1	2	6-24	7/14	–	–	$325	–
*Broadview, IL	30	–	38,529	–	–	–	32,919	–	29,517	–	25,947	20,466	25,947	4	40	Y	8/1	–	10-25	10/120	–	–	OM	OM
Brockway, PA	4	23,435	–	–	–	19,423	–	–	–	–	–	12,500	15,892	2	40	Y	11/2	1	5-20	UNL	–	–	$200	$180
Brookville, PA	X	–	18,876	–	17,333	–	–	–	16,981	–	–	11,668	16,981	6	40	Y	8/X	3	10-25	12/80	–	–	$350	

	No. of Uniformed Police & Detectives	CHIEF		CAPTAIN		LIEUTENANT		SERGEANT		DETECTIVE		PATROLMAN			Hours Per Week	Overtime Compensation	Number of Paid Holidays Specified	Personal Days	Annual Vacation Days: Min.-Max.	Annual Sick Leave Days: Maximum Accumulation	Sick Leave Buyback	Sick Dependent Leaving Night	Annual Clothing Allowance	Clothing Maintenance
		MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	Max. Min. Yrs.										
POPULATION UNDER 10,000 (Continued)																								
Brownsville, PA	8	–	16,500	–	–	–	14,500	–	–	–	–	–	13,054	–	40	Y	8/X	3	5-25	15/60	X	X	$300	X
*Buckhannon, WV	9	–	16,500	–	–	–	13,500	–	–	–	–	10,080	12,288	2	40	Y	11/11½	–	12-17	15/60	–	–	$350	$360
Buffalo Twp., Sarver, PA	2	–	–	–	–	–	–	–	–	–	–	14,500	16,500	½	40	Y	8/2	–	5-10	5/X	–	–	$375	–
*Calverton Park, MO	12	–	18,408	–	–	–	–	–	15,350	–	–	12,584	14,664	90d	40	Y	8/1	Y	14	12/30	–	–	–	–
Camden, WV	2	–	17,050	–	–	–	–	–	–	–	–	10,000	14,000	3	40	N	8/2	–	10-15	12/90	33%	–	$250	–
Cannelton, IN	3	13,500	13,500	–	–	–	–	–	–	–	–	11,500	12,000	1	48	–	–	–	14	–	–	–	$500	–
Carey, OH	7	–	17,535	–	15,621	–	14,791	–	14,591	–	–	13,241	14,371	½	40	Y	9½/X	–	14-28	120	–	–	$450	X
*Caseyville, IL	7	24,500	–	–	–	–	–	20,176	20,696	–	–	17,160	19,760	15	40	Y	9/11½	2	5-20	10/60	–	–	$360	–
Center Line, MI	1	–	–	–	–	30,446	–	26,345	28,321	26,345	28,321	18,670	24,507	5	40	Y	13/11½	UNL	16-25	–	–	$350	$550	X
Charlestown, IN	8	15,670	–	14,160	–	13,691	–	14,400	–	–	–	12,795	15,098	18	40	N	9/1	10	7-28	–	–	–	$450	–
Cicero, IN	5	–	18,096	–	–	–	16,328	–	15,808	–	–	–	15,444	–	40	N	–	–	7-21	12/–	–	–	$600	–
Columbia City, IN	10	–	16,771	–	16,408	–	–	–	–	–	–	–	15,219	–	40	N	–	–	8-16	–	–	–	$300	–
Conway, PA	4	–	17,500	–	17,200	–	–	–	–	–	–	16,515	–	–	40	Y	10/2	2	14-35	5/–	–	–	$300	–
Coopersburg, PA	4	–	22,285	–	–	–	–	–	18,218	–	–	13,000	17,718	3	40	Y	10/1	1	5-25	X	X	–	100%	$150
Copley, PA	4	15,656	–	–	–	–	–	–	–	–	–	12,100	14,830	X	40	Y	10/1	1	7-28	X	X	X	$200	X
*Countryside, IL	23	–	36,500	–	–	30,469	32,500	25,383	29,000	–	–	19,431	24,500	3	40	Y	8/1	1	5-25	12/180	25%	–	–	–
*Crete, NE	9	–	22,212	–	–	–	–	–	20,964	–	–	13,116	19,752	7	40	Y	12/2	2	10-20	12/90	–	–	–	–
*Crystal City, MO	9	18,000	–	–	–	–	–	14,500	–	14,100	–	13,000	14,100	2	37½	Y	11/2½	1	5-25	10/120	–	–	–	X
*Culpeper, VA	18	21,189	29,816	–	–	17,432	24,530	14,342	20,180	–	16,902	11,799	16,602	7	40	Y	8/1	–	12-18	UNL	–	–	100%	$220
Culver, IN	X	–	18,000	–	–	–	–	–	–	–	–	13,500	16,000	1	48	N	9/1	–	5-20	12/60	–	–	–	–
Devils Lake, ND	13	22,000	–	17,680	–	–	–	15,840	–	16,332	–	13,140	14,520	1	40	Y	9/11½	–	12-30	12/UNL	25%	–	100%	–
Dickson City, PA	X	20,750	–	–	–	–	–	–	–	–	–	15,965	–	–	40	Y	11/11½	3	5-20	UNL	–	–	$300	–
*Dowagiac, MI	15	23,000	–	21,000	–	–	–	19,000	–	18,000	–	16,000	18,000	2	40	Y	11/11½	–	5-30	12/120	–	Y	$250	–
Dubois, PA	11	–	–	18,551	18,707	15,914	17,987	15,302	17,296	–	–	13,560	16,949	4	40	Y	11/1	2	10-25	18/120	33%	–	$300	–
Dyer, IN	13	–	27,252	–	–	–	23,059	–	21,662	–	–	18,168	19,666	1	40	Y	6/1	–	6-30	30/X	–	–	$371	–
East Stroudsburg, PA	11	–	–	20,087	–	–	–	18,832	–	18,832	–	16,288	17,688	3	40	Y	9/11½	1	5-20	UNL	–	–	100%	$150
Evans City, PA	2	17,780	–	–	–	17,160	–	–	–	–	–	–	–	–	40	Y	7/11½	1	5-25	4/20	X	X	$300	X
Falls Creek, PA	X	–	13,275	–	–	–	–	–	–	–	–	–	–	–	40	N	9/1	1	14-21	10/50	–	–	$250	–
Fairmont City, IL	5	–	18,500	–	–	–	12,960	–	–	–	–	12,060	12,660	1	40	Y	7/11½	1	5-20	9/27	33%	–	$200	–
Farrell, PA	23	–	24,103	22,462	21,242	–	–	–	20,393	–	21,982	16,495	19,638	3	40	Y	11/X	4	10-30	15/120	–	–	$250	–
Franklin, PA	18	–	24,750	–	20,297	–	19,676	–	18,722	–	–	12,834	18,732	3	40	Y	11/2	3	10-30	21/125	50%	18/18	$350	$180
Foxcroft, PA	X	29,780	–	–	–	–	–	25,695	–	–	–	20,870	22,876	2	40	Y	7/2	8	10-25	15/120	100%	9/9	–	150
Frontenac, MO	18	–	31,800	–	–	–	24,960	–	23,520	–	21,960	17,160	21,120	4	40	Y	8/1	2	10-20	60/–	–	–	$300	X
Gates Mills, OH	11	–	31,500	–	–	–	25,394	–	24,014	–	23,000	20,113	22,113	3	40	Y	7/1	–	10-20	UNL	–	–	FURN	–
Geneva, IL	16	–	31,939	–	–	–	–	26,644	27,996	–	–	20,353	25,001	7	40	Y	12/11½	–	5-16	12/60	–	–	$300	–
Glencoe, IL	27	37,400	40,070	32,700	34,740	29,100	31,200	–	–	–	–	18,960	27,360	VAR	40	Y	11/1	–	10-20	12/180	–	–	$250	X
Greensburg, IN	12	16,200	19,040	15,400	18,240	14,800	17,640	–	–	15,400	18,240	14,200	17,040	20	40	Y	6/1	1	10-20	10/30	–	–	$500	–
Gulf Breeze, FL	12	22,500	–	–	–	16,006	–	14,076	–	14,034	–	11,037	–	None	45	Y	11/2	–	10-25	834/–	–	–	$200P	–
*Hales Corners, WI	X	–	30,000	–	–	–	27,500	–	24,484	–	–	19,475	23,052	4	40	Y	10/11½	5	12-24	12/120	50%	$1,500	$215	–
Hastings, MI	12	–	24,500	–	22,000	–	–	–	20,685	–	20,230	14,134	18,774	3	40	Y	9½/3	–	10-25	12/100	–	–	Issued	Issued
Hellertown, PA	X	–	24,950	–	–	–	–	–	18,151	–	–	14,000	18,510	½	40	Y	12/2½	–	10-25	20/100	–	15/20	Full	–

	No. of Uniformed Police & Detectives	CHIEF		CAPTAIN		LIEUTENANT		SERGEANT		DETECTIVE		PATROLMAN			Hours Per Week	Overtime Compensation	Number of Paid Holidays Pay or Pay	Personal Days	Annual Vacation Days: Min - Max	Annual Sick Leave (days) Maximum Accumulation	Sick Leave Buyback	Shift Differential Evening/Night	Annual Clothing Allowance	Clothing Maintenance
		MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	Years Min to Max											
POPULATION UNDER 10,000 (Continued)																									
Highland Heights, OH	10	–	31,341	–	–	–	28,224	–	25,787	–	23,478	16,935	23,478	3	40	Y	10/2	1	10-25	15/X	5d	–	$450	–
Hillsboro, OH	X	17,246	17,653	15,162	15,739	–	–	14,145	14,755	14,145	14,755	13,127	13,738	3	40	Y	10/1	X	5-15	15/UNL	25%	X	$200	X
Homestead, PA	X	23,500	–	–	–	–	–	20,020	–	–	–	18,200	–	3	40	Y	13/2½	1	10-30	20/60	100%	20/.25	$250	–
Hopkinton, NH	11	18,000	23,000	–	–	–	–	15,000	19,000	–	–	13,000	17,000	–	40	Y	11/11½	–	6-15	20/110	–	–	–	–
Hoquiam, WA	22	–	30,245	–	–	–	25,782	–	24,188	–	22,265	20,622	22,265	2½	40	Y	11/1	–	12-25	5/5	–	–	$250	100%
*Hudson, NY	22	19,753	–	–	–	–	–	15,742	–	15,742	–	13,737	14,682	3	40	Y	11½/1	5	10-25	18/200	25%	Y	$450	–
Hunting Valley, OH	11	–	31,000	–	–	–	–	–	23,026	–	22,070	–	21,686	–	40	Y	8/1	+	10-20	15/UNL	X	–	Full	$160
Ilion, NY	X	19,497	19,497	–	–	–	–	14,354	15,192	–	–	12,538	14,354	3	40	Y	12/1	5	10-25	X/115	–	12%	$275	–
Indian Hill, OH	16	–	37,201	–	32,557	–	28,344	–	–	–	28,344	20,588	25,679	3	42	Y	9/2	–	14-28	10/80	50%	–	–	–
*Iona, MI	9	–	22,500	–	–	–	–	–	21,500	–	–	16,401	20,080	4	40	Y	9/2	1	10-21	13/120	–	–	$200	100
Jackson, OH	11	–	15,876	13,562	14,976	–	–	12,646	14,019	–	–	11,761	13,748	15	40	Y	9/1½	3	10-30	15/120	25%	–	$300	–
*Jacksonville, AL	16	14,373	21,242	–	–	13,111	19,148	12,124	17,523	–	–	11,190	16,551	15	40	Y	10/2	–	10-20	12/UNL	25%	–	$300	–
Renhorst, PA	X	17,320	–	–	–	–	–	15,746	–	–	–	14,185	–	–	40	Y	7½	2	5-20	VAR	–	–	100%	–
*Kermit, TX	12	–	24,273	–	20,412	–	–	17,792	19,354	–	–	15,725	18,807	3	44	Y	10/X	3	12-30	12/90	X	X	X	X
*Kaysel, WV	8	–	14,500	–	–	–	–	–	–	–	–	–	11,615	–	40	Y	11/2	X	5-25	40/X	X	X	100%	X
*Kinglisher, OK	7	19,200	21,600	17,400	19,032	–	–	–	–	–	–	13,800	15,600	–	40	Y	7/X	3	10-15	–	–	–	–	–
*Kings Point, NY	X	–	49,500	–	–	–	47,950	–	35,391	–	–	22,080	29,724	4	37	Y	13½/a	5	20-27	2%/40	50%	10%	$400	$400
Knox, IN	8	14,337	–	14,087	–	–	–	13,837	–	–	–	–	13,337	1	40	N	6/X	–	5-15	12/None	–	–	$400	–
*Lake Saint Louis, MO	9	23,320	–	–	–	19,355	–	15,900	–	–	–	13,000	14,168	–	40	Y	7/1½	1	10	48/X	–	–	100%	–
Lawrenceburg, IN	9	20,000	–	–	–	–	–	18,000	–	–	–	16,100	16,600	½	40	Y	8/1½	1	5-24	8/50	–	$510	$600	–
Lebanon, KY	X	–	18,000	–	–	–	–	–	14,500	–	–	–	14,500	1	40	Y	7/1	–	10-20	12/90	–	15	$175	–
*Lewisburg, TN	10	–	20,329	15,849	16,523	–	–	–	12,480	15,849	16,523	14,401	15,075	X	48	Y	8/1½	X	5-15	18/90	–	Y	FURN	X
Lexington, AL	8	25,000	30,000	–	–	–	–	–	20,405	–	–	15,084	17,884	6	42	N	9/1	1	13-18	12/120	–	–	100%	100%
Lodington, MI	13	–	25,000	–	24,000	–	20,851	–	19,910	–	19,910	16,412	19,014	2	40	Y	11/3	1	5-20	12/150	–	–	FURN	–
*Mandeville, LA	X	18,000	20,800	13,000	16,800	12,500	14,000	10,000	12,000	–	–	9,000	11,000	3	40	Y	8/2	–	10	6/10	–	–	FURN	–
Marengo, IL	9	–	25,000	–	–	–	–	21,115	21,486	–	–	13,436	18,907	5	40	Y	8/1	1	5-15	6/60	50%	–	$200	–
Mars, PA	4	17,390	–	–	–	–	–	–	–	–	–	15,080	–	–	40	N	7/2	–	5-10	5/–	–	–	$300	–
Martins Ferry, OH	16	24,674	–	–	–	21,268	–	–	–	–	–	17,446	18,980	1	40	Y	8/2½	3	10-30	15/UNL	50%	05/.10	$300	–
Masontown, PA	8	20,800	24,100	–	–	16,640	18,720	16,220	18,160	–	–	13,120	15,626	3	40	N	8/1½	7	5-34	–	–	20/.30	$300	–
Mayfield Village, OH	13	26,989	29,728	–	–	–	–	22,578	23,480	–	–	17,122	21,984	2	40	Y	12/X	6	5-30	15/UNL	–	–	$300	incl
McKees Rocks, PA	10	–	18,408	–	17,647	–	17,155	–	–	–	–	–	16,440	1	40	Y	11/1	1	5-25	20/80	–	–	$235	–
Mechanicsburg, PA	13	23,500	–	–	–	–	–	20,500	21,000	–	–	13,500	18,000	5	40	Y	10/1½	2	10-25	15/120	–	–	$200	–
Merchantville, NJ	11	–	25,000	–	–	22,400	–	20,354	–	20,354	–	10,500	19,100	3	40	Y	12/1	3	5-20	15d/260d	–	–	–	–
Middlesex Twp., PA	5	–	–	–	–	–	–	–	–	–	–	15,400	18,000	1	40	Y	9/2	3	10-20	14/120	75%	–	$425	–
*Monroeville, AL	14	18,694	20,618	17,810	18,694	16,952	17,810	16,146	16,952	–	–	11,466	16,146	X	40	Y	7/1	–	12-17	12/90	–	–	–	–
Monticello, IN	9	–	16,995	–	14,980	–	14,980	–	–	–	–	–	14,305	–	40	Y	9/1	X	10-30	(30)	–	–	$400	–
Mooresville, IN	9	–	19,440	–	17,820	–	16,740	–	15,660	–	–	14,188	14,688	1	40	N	7/1	–	10-15	10/–	–	–	–	–
Mt. Carmel, PA	9	–	17,200	–	–	–	16,800	–	–	–	–	15,100	16,500	X	40	N	4/1	–	10-20	15/90	–	–	$300	–
Mt. Vernon, IN	13	–	16,470	–	–	–	14,857	–	14,457	–	–	–	13,995	X	40	Y	10/1	4	14-28	X	–	–	$550	–
Napoleon, OH	X	21,612	27,602	–	–	16,952	21,612	–	–	–	–	13,957	17,805	6	40	Y	6½/2	3	5-20	15/UNL	–	–	100%	100%
Newburgh, IN	X	–	19,300	–	–	–	17,200	–	–	–	–	12,200	X	X	40	N	12/11½	–	X	6/24	50%	–	–	–

	No. of Uniformed Police & Directives	CHIEF		CAPTAIN		LIEUTENANT		SERGEANT		DETECTIVE		PATROLMAN			Hours Per Week	Overtime Compensation	Number of Paid Holidays Rate of Pay	Personal Days	Annual Vacation (Days Min Maxi	Annual Sick Leave (days) Maximum Accumulation	Sick Leave Buyback	Shift Differential Evening/Night	Annual Clothing Allowance	Clothing Maintenance
		MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX											
POPULATION UNDER 10,000 (Continued)																								
*New Lenox, IL	9	–	29,923	–	–	–	–	22,129	24,377	–	–	17,763	22,318	X	40	Y	10/2	2	10-20	6/–	–	.05	$150	ALL
New Lexington, OH	6	–	19,000	–	–	–	–	–	17,246	–	–	12,168	13,374	2½	40	Y	8/3	1	10	14/40	X	–	$300	–
Northampton, PA	11	–	22,446	–	–	–	19,870	–	–	–	–	15,400	18,540	3	40	Y	13/2	–	12-24	10/X	–	25/.30	FURN	$50
*Olney, IL	14	28,300	–	–	–	–	–	15,600	20,405	14,102	18,554	14,102	18,554	6	40	Y	10/2½	1	5-20	12/120	50%	Y	Full	Full
Orange Village, OH	8	24,740	–	–	–	22,383	–	21,205	–	–	–	15,315	20,027	7	40	Y	7/1	1	10-15	15/UNL	33⅓%	–	$250	$150
*Page, AZ	13	24,086	32,323	–	–	22,963	30,763	19,822	26,561	19,822	26,561	17,160	22,963	5	40	Y	9/11½	3	10-15	6/None	33⅓%	–	$480	–
*Paris, KY	16	18,574	19,489	–	–	14,622	15,350	13,291	13,977	–	–	11,544	12,667	1½	40	Y	–	–	15-18	12/82	–	–	100%	100%
*Parkland, FL	6	22,000	23,800	–	–	19,000	22,500	17,880	18,650	–	–	15,980	–	–	40	Y	9/11½	–	5-15	12/36	–	–	–	–
*Payson, AZ	12	20,028	–	–	–	17,268	–	16,044	–	–	–	15,132	19,308	5	40	Y	8/11½	–	10-20	12/60	–	–	$480	–
*Pepper Pike, OH	X	–	27,300	–	–	–	23,950	–	23,100	–	22,700	20,150	22,350	1	X	Y	10/X	–	10-20	(120)	–	–	$400	$350
*Pleasant Ridge, MI	9	–	–	–	–	–	27,630	–	26,380	–	–	–	25,127	3	40	Y	12/2	3	10-25	12/120	120d	–	$250	$250
Plymouth, IN	14	18,500	–	–	–	–	–	17,000	–	17,000	–	13,000	16,000	1	37½	Y	14/11½	–	5-15	10/X	X	–	$800	X
Point Pleasant, WV	10	–	20,000	–	–	–	11,700	–	11,400	–	11,400	9,600	10,200	1	40	Y	14/11½	–	10	15/X	–	–	–	–
*Port Clinton, OH	11	–	21,312	–	20,112	–	–	–	19,212	18,612	19,212	18,012	18,612	2	40	Y	10/2½	1	10-25	15/None	–	–	$300	–
Portland, IN	10	16,056	–	–	–	–	–	14,400	–	14,400	–	13,252	13,752	1½	37½	Y	8/1	–	14-21	14/30	–	–	$525	–
*Pryor, OK	X	–	18,000	–	17,700	–	–	15,840	16,440	16,620	16,920	12,480	15,120	1	40	Y	9/1	–	15	15/15	–	–	$720	–
Homersburg, PA	1	–	14,600	–	–	–	–	–	–	–	–	–	–	–	100	N	–	–	5-15	–	–	–	100%	–
Ripley, TN	21	–	17,208	–	13,680	–	–	–	13,032	–	–	10,620	12,324	3½	40	Y	8/X	–	7-14	X	–	–	$360	–
Riverside, IL	19	–	33,021	–	–	–	29,515	–	–	–	27,029	20,216	25,606	10	40	Y	8/1	–	15-30	–	–	–	VAR	–
Ro[illegible]hester, PA	X	24,836	24,836	–	–	–	–	18,709	–	–	–	13,500	18,356	3	40	Y	10/1	2	10-25	7/7	–	–	$275	–
[illegible]wood Lake, IL	9	–	20,798	–	–	–	–	18,558	19,246	–	–	16,315	19,436	11	42	Y	6/2	8	7-28	8/X	–	–	–	–
Rushville, IN	13	16,000	16,000	13,900	13,900	–	–	13,600	13,600	13,900	13,900	13,000	17,000	20	38	N	8/1	–	8-28	12/–	–	–	$450	–
St. Marys, GA	13	23,000	–	20,352	–	18,698	–	17,172	–	15,594	–	13,356	15,594	1	48	Y	7/1	X	15-15	X/UNL	100%	–	–	–
St. Marys, PA	7	–	21,528	–	–	–	–	–	–	–	–	18,116	19,383	2	40	Y	12/11½	2	5-20	15/75	–	–	–	–
Sandy Twp., PA	5	20,331	–	19,664	–	–	–	–	–	–	–	14,263	19,096	2	40	Y	11/11½	2	10-25	X	33⅓%	–	$350	–
Sanibel, FL	17	28,828	37,481	24,065	31,283	21,902	28,374	19,884	25,854	19,884	25,854	16,265	21,132	X	40	Y	10/2	1	5-15	120hr	25%	–	ALL	–
Sea Girt, NJ	X	–	26,868	–	–	–	–	–	23,123	–	–	14,277	21,626	4	40	Y	11/11½	3	5-15	12/X	–	–	$350	$50
Shenandoah, PA	7	14,025	–	13,300	–	12,950	–	12,475	–	–	–	11,650	12,250	1	40	Y	9/1	4	10-20	18/120	–	–	$300	QM
Shillington, PA	X	16,584	25,312	–	–	–	–	15,464	20,732	–	–	14,859	20,127	2½	40	Y	13/11½	2	5-30	30/150	–	–	–	–
Sinking Spring, PA	3	–	20,300	–	–	–	–	18,500	–	–	–	12,500	16,500	3	40	Y	7/11½	2	5-20	12/40	–	–	$1,200	–
Slatington, PA	4	–	17,164	–	–	–	–	–	–	–	–	12,250	15,838	4	40	Y	9/2	X	5-25	10/45	–	Y	100%	X
Slippery Rock, PA	4	16,748	–	–	–	–	–	–	–	–	–	13,038	16,032	10	40	Y	8/11½	1	10-20	12/30	–	–	$300	–
Smyrna, DE	11	18,428	27,206	–	–	–	–	13,769	20,321	13,104	19,344	11,876	17,555	23	40	Y	11/11½	–	12-21	12/100	–	–	–	–
Snow Hill, MD	6	–	16,799	–	–	–	–	–	13,374	–	–	11,094	12,940	X	40	Y	15/1	3	10-15	X	–	–	$50	–
Snyder Twp., PA	X	17,400	–	–	–	–	–	–	–	–	–	10,500	13,500	X	40	Y	7/1	1	5-14	5/–	–	–	$150	–
*South Elgin, IL	13	17,543	27,400	–	–	–	25,288	–	23,174	–	–	15,775	21,580	5	40	Y	6/1	–	10-15	5/–	100%	–	UNL	–
Spencer, IN	5	12,480	–	–	–	–	–	–	–	–	–	11,440	–	–	40	Y	8/11½	–	6-26	12/30	–	–	–	X
Steelton, PA	10	–	22,875	–	–	–	–	17,875	19,875	–	–	13,000	18,900	20	40	Y	12/2½	X	5-20	15/120	–	–	FURN	FURN
*Sturgis, MI	15	–	24,300	–	–	–	–	–	20,686	–	20,686	16,286	19,510	4	40	Y	8/11½	1	5-25	X	X	–	Full	Full
Tamaqua, PA	10	18,500	–	–	–	–	–	16,240	–	–	–	–	15,830	–	40	Y	8/1	4	5-25	12/180	–	–	$300	$40
Tell City, IN	9	17,000	–	–	–	15,240	–	14,400	–	14,400	–	13,220	14,220	1	40	Y	8/1	–	7-15	5/30	50%	–	$400	–

	No. of Uniformed Police & Detectives	CHIEF		CAPTAIN		LIEUTENANT		SERGEANT		DETECTIVE		PATROLMAN		Years Min to Max	Hours Per Week	Overtime Compensation	Number of Paid Holidays Rate of Pay	Persona Days	Annual Vacation (Days Min-Max)	Annual Sick Leave (days) Maximum Accumulation	Sick Leave Buyback	Shift Differential Evening/Night	Annual Clothing Allowance	Clothing Maintenance
		MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX	MIN	MAX											
POPULATION UNDER 10,000 (Continued)																								
Tipp City, OH	10	18,000	25,500	–	–	–	–	15,912	24,086	–	–	16,037	20,582	5	40	Y	9/1½	4	10-25	15/UNL	25%÷	20/40	$300	–
Tipton, IN	9	–	18,000	–	15,860	–	–	14,360	16,060	–	–	12,850	13,310	X	40	N	7/1	X	6-12	15/90	X	X	$700	X
*Tombstone, AZ	6	18,000	20,000	–	–	–	–	–	–	–	–	11,275	14,300	4	40	Y	9/2	X	10-20	12/60	–	–	$200	–
Trinidad, CO	17	18,000	24,000	14,000	–	–	–	13,000	–	Rank	–	12,800	14,125	1	40	Y	12/2	–	12-30	12/90	50%	5%/10%	$400	–
Twinsburg, OH	17	28,816	UNK	–	–	26,313	27,249	19,678	24,148	–	–	17,878	21,829	6	40	Y	11/1	2	10-25	15/–	25%	21/31	$450	–
Upper Sandusky, OH	9	15,019	16,687	13,581	15,880	13,302	14,780	–	–	–	–	12,749	14,165	1	42	Y	9/1	–	10-25	15/UNL	30d	–	$200	–
*Velda Village, MO	7	–	13,400	–	–	–	13,224	–	12,960	–	–	12,110	12,610	1	40	Y	7/1	–	14	(320)	–	–	$800	–
*Vernon Hills, IL	16	–	34,500	–	–	–	–	26,312	30,264	–	–	19,053	26,312	6	40	Y	7/1	2	10-25	12/90	–	–	$250	–
Walnutport, PA	7	–	16,848	–	–	–	–	–	–	–	–	12,480	–	–	40	Y	12/2	2	10-25	10/30	–	Y	$200	–
Waynesboro, PA	15	–	23,800	–	–	–	–	–	20,800	–	–	14,827	16,269	8	40	Y	–/1	12	10-20	12/90	50%	–	100%	–
West Reading, PA	7	–	23,078	–	–	–	–	–	21,030	–	–	16,880	19,880	2	40	Y	13/2½	–	5-20	15/180	–	–	100%	$200
*Woodson Terrace, MO	12	23,471	–	18,900	–	17,336	–	–	–	–	–	14,815	16,476	5	40	N	12/1	–	5-20	30/30	–	–	–	–
Wyomissing, PA	12	–	27,515	–	–	–	–	–	20,635	–	19,444	17,032	19,444	3	40	Y	9/1	4	7-20	30/150	–	–	100%	–
STATE POLICE																								
*Alaska State Police	X	60,360	82,560	46,800	63,636	44,508	60,360	41,666	58,044	41,666	58,044	35,976	50,112	13	37½	Y	11/2	X	24-36	–	–	3.75/7.50	$600	$45m
*Arkansas State Police	480	23,062	37,310	16,822	28,080	15,808	26,442	14,846	24,752	12,246	23,036	12,246	23,036	14	40	N	12/1	–	12-22	12/90	–	–	$1,200	–
*California Highway Patrol	5,143	44,796	54,024	35,568	42,804	29,652	35,568	25,884	31,032	–	–	22,164	26,472	5	40	Y	11/1	3	10½-21	96/None	–	–	$350	–
*Colorado State Police	518	39,576	53,028	31,008	41,556	26,784	35,892	23,148	31,008	–	–	18,144	24,300	10	40	N	11/1	–	12-21	15/UNL	X	–	–	$100
*Delaware State Police	436	–	–	28,752	31,423	26,205	29,891	24,222	28,037	19,125	26,719	18,416	24,210	19	40	Y	12/1	1	15-25	15/120	50%	$500y	$500	Pd
*Idaho State Police	146	35,856	–	24,555	32,928	22,279	29,858	18,333	24,555	–	–	15,075	20,212	X	40	N	9/1½	–	12-20	12/UNL	X	–	–	–
*Illinois State Police	1,948	31,560	38,556	29,436	36,168	26,268	34,164	23,376	32,220	–	–	18,444	30,348	20	40	N	12/1	5/10	10-25	90/UNL	100%	–	–	–
*Louisiana State Police	887	–	–	23,616	33,156	21,528	31,260	18,096	25,356	17,052	24,852	14,964	24,852	10	40	Y	8/1½	–	12-24	UNL	X	–	$600P	$850
Maryland State Police	1,500	48,000	–	25,054	32,910	24,700	30,616	18,846	24,757	–	–	15,975	20,986	6	40	Y	14/1	3	10-25	15/UNL	–	25	$350	$175
*Massachusetts State Police	832	37,798	47,342	25,325	30,252	22,120	26,423	19,412	23,187	23,867	28,272	17,114	20,443	7	40	Y	11/1	5	10-25	15/UNL	20%	–	$500	Y
*Michigan State Police	2,092	–	–	31,675	46,625	22,884	42,344	27,582	28,939	Rank	–	20,796	25,285	4	40	Y	11/1½	–	15-25	13/UNL	50%	5%/5%	$500	$250
*Missouri Highway Patrol	835	25,164	41,578	20,940	34,397	19,956	32,724	18,972	31,051	–	–	15,692	28,297	35	40	N	11+/1	–	15-21	15/–	–	–	$480	–
Nebraska State Patrol	394	–	–	22,624	31,674	21,046	29,465	18,212	25,497	–	–	14,660	22,064	X	45	Y	11/1	–	12-20	12/180	–	–	FURN	$1,200
*Nevada Highway Patrol	183	28,319	38,817	22,752	30,950	21,797	29,605	20,887	28,319	–	–	19,184	25,918	7	40	Y	11/1½	–	15-20	15/UNL	–	5%	$550	–
*New Mexico State Police	381	38,340	48,156	29,088	32,400	25,668	28,560	22,692	25,224	17,088	23,520	15,888	22,320	10	45	N	10/1	1	15-24	30/180	–	–	$480	–
*New York State Police	3,443	38,031	38,031	35,323	35,323	33,020	33,020	27,415	27,415	26,155	26,155	14,831	23,388	20	40	Y	11/1	5	20-25	13/225+	VAR	Y	–	–
*North Carolina Highway Patrol	X	34,404	50,568	22,488	32,856	20,448	29,880	17,880	25,920	–	–	14,256	23,556	9	40	N	10/1½	–	10-24	12/UNL	–	Y	–	–
*North Dakota Highway Patrol	99	–	–	21,600	31,644	21,600	31,644	17,784	26,052	–	–	16,128	23,628	10	40	Y	9/1	–	12-24	12/X	–	–	–	$80
*Pennsylvania State Police	3,754	41,250	41,250	28,616	32,978	25,076	28,616	23,034	26,205	–	–	15,711	23,034	25	40	Y	14/2	3	10-25	15/240	30%	5%	–	$400
*Tennessee State Police	552	26,364	39,972	18,348	27,588	15,792	21,504	13,548	18,840	–	–	11,532	16,404	–	42½	Y	12/1	–	12-24	12/UNL	–	–	–	–
*Utah Highway Patrol	X	39,568	47,001	28,418	34,932	25,599	31,466	22,697	27,917	–	–	16,036	25,077	7½	40	Y	11/1	13+	13-19½	13/None	–	–	$520	–
*Vermont State Police	256	32,159	53,549	26,835	44,509	22,798	37,470	20,426	33,122	17,265	27,888	15,363	24,502	X	47½	Y	12/11½	VAR	12-21	VAR/UNL	50%	4%	FURN	$100
*West Virginia State Police	567	39,375	–	22,260	25,260	20,916	23,916	18,660	21,660	–	–	15,564	19,392	32	42	Y	15/1	–	15-30	18/–	–	–	–	–
*Wisconsin State Police	X	34,989	48,636	24,787	34,451	21,044	29,248	19,387	26,586	–	–	15,580	23,338	10	40	Y	10½/11½	2	10-25	13/X	–	X	FURN	–

Mr. FASONE. Title V of the United States Code provides the recourse for this problem. Under this law, when we encounter recruitment or retention problems at a facility, and when the problems are a result of noncompetitive salaries, we can ask the Office of Personnel Management to let us pay higher pay rates than the general schedule provides. In reviewing these requests OPM requires us to submit a considerable amount of data on the extent of our problem and the competition we are trying to beat. We have had some difficulties in meeting the law's criteria as it is interpreted by OPM.

Now a medical center director may suffer a high police turnover problem and the week-to-week problems of staff shortages, overtime costs, and the inexperience of newly hired police officers for quite some time. After exhausting the means available to recruit and retain police without sacrificing performance standards, the director may then direct his personnel officer to initiate the several surveys and the internal data collection necessary to submit a title V special pay request.

These external wage comparison surveys and internal data collection requirements must be based on 1 year's experience to constitute a complete submission. When a facility has not done this before, it can be quite time-consuming. Under current procedures, once this required information has been submitted to OPM, it takes 4 to 8 months to get approval or disapproval. Special salary rates were granted for our police officer positions at our medical centers in New York City, Northport, Chicago, Dallas, and Palo Alto, Calif. However, because of the lack of success and the effort involved in processing such requests, we have not submitted a special salary rate for VA police officers since April 1983.

In the specific case of our New York City area medical centers, the salary increases granted in June 1983, following a submission in June 1980, were lower than those requested by the VA and are not expected to improve recruitment and retention appreciably. Special salary rates are subject to annual review and OPM renewal. When special salary rates for our medical center in Milwaukee were granted in 1980 a 30-percent annual turnover rate was successfully reduced to 5 percent. In 1983, the special salary rates were withdrawn by OPM due to the medical center's inability to demonstrate a continued retention problem and because of a lengthy list of applicants for VA police officer positions, which existed on the area OPM office register.

Mr. Chairman, we are keenly aware of the necessity to provide a highly effective umbrella of security over out patients, our employees, and our property. We are also certain that the desired protection can be achieved through highly qualified and well-trained security personnel. The handling of security and law enforcement at our medical centers is unique. To be fully effective, it requires that we have the means of recruiting and retaining well-qualified individuals who can serve as police officers in the VA's medical environment.

Our incident rates in the areas of both personal and property crime remain unsatisfactorily high, much higher than the published incidents of crimes, offenses, and law enforcement actions experienced by the several other self-protection forces of other Fed-

eral agencies. A sampling of our fiscal year 1983 offense reports shows 17,579 thefts and robberies, 9 rapes and 12 attempted rapes. Our police responded to 40,000 disturbances and over 4,000 assaults requiring 79 uses of the VA police nonlethal weapon. Our police also confiscated almost 4,000 weapons. They made almost 13,000 stops of suspicious persons and 3,700 arrests. Over 170,000 offenders were issued violation notices and another 48,000 citations into U.S. district courts across the Nation were completed. Our total loss of accountable Government and personal property alone exceeded $5 million.

A complete summary of our crime reports for the past 5 years is submitted for possible inclusion in the record.

[Subsequently, the Veterans' Administration furnished the following information:]

The DM&S Security Service maintains an annual summary of offenses and law enforcement activities. This summary is a condensation of a detailed management information report system through which all medical centers provide offense and enforcement activities on a monthly basis. This material follows:

ANNUAL SUMMARY—DM&S UNIFORM MONTHLY CRIME REPORT (RCS 10-259)

Summary of offenses and enforcement activities	Fiscal year—				
	1979	1980	1981	1982	1983
Forced entry	588	672	711	748	691
Theft	15,276	17,458	17,336	17,613	17,499
Robbery	59	80	69	89	80
Rape	9	12	6	3	9
Attempted rape	19	17	14	13	12
Manslaughter	5	4	3	1	2
Weapon possession	1,189	1,517	1,753	2,756	3,935
Drug possession	1,183	1,386	1,403	1,458	1,333
Liquor possession	5,610	5,482	5,649	5,780	5,002
Vandalism and arson	2,738	2,798	2,789	2,778	2,684
Assaults	2,816	3,574	3,893	4,106	4,108
Disturbances	38,942	41,699	39,072	39,868	40,078
Courtesy traffic tickets	183,050	187,789	177,006	173,939	170,274
Stop and question [1]					12,968
Physical arrests	1,813	2,107	2,177	3,341	3,682
U.S. District Court Citation (traffic)	38,731	54,608	42,390	48,017	48,341
U.S. District Court Citation (nontraffic)	2,609	2,997	2,969	3,992	2,731
Police weapon use	110	80	91	69	79
Total crimes and offenses	119,610	134,408	126,948	138,408	129,880
Total dollar loss [2]	$3,890,007	$4,663,417	$5,479,050	$5,308,852	$5,187,683

[1] Not reportable in fiscal years 1979, 1980, 1981, and 1982.
[2] Accountable government and reported personal property losses only. Does not include losses of expendable supplies and linen losses.

Mr. FASONE. The vulnerabilities to criminal actions at medical centers greatly exceed those of typical Federal properties, such as office buildings and parks. Illustrations of these peculiar vulnerabilities are as follows. A Veterans' Administration medical center contains a repository for the bulk storage of a minimum 90-day supply of over 125 drugs of potential abuse. In addition, a VA medical center typically contains two pharmacy facilities and between 20 and 100 nursing stations containing 2-day supplies of narcotics. The VA medical center as a repository of potential drugs of abuse has become a unique target of the attainment of drugs through burglary, robbery, conspiratorial theft, and pilferage.

All VA medical centers operate from one to three silver recovery units with a total annual recovery of $2.5 million in silver bullion.

I will not read the rest of my testimony describing the several unique vulnerabilities of our medical centers.

Mr. Chairman, as the immediate program manager responsible for VA security operations, I welcome the intent of H.R. 4792 and I thank you for the opportunity to testify. I will be glad to answer any questions.

Mr. EDGAR. Thank you very much for your statement. The full text of your statement will be made a part of the record, without objection.[1]

I yield to my colleague, John Paul Hammerschmidt, for the first questions.

Mr. HAMMERSCHMIDT. Thank you, Mr. Chairman. Dr. Custis, the Veterans' Administration previously furnished medicines to service-connected veterans who were being treated by non-VA doctors. On page 4 of your statement, you discuss possible verification that prescriptions are actually written for service-connected disabilities. How did you handle the program before, and why would the passage of H.R. 3876 complicate the administration of the pharmacy program, inasmuch as you used to do the very thing that the bill would allow? Moreover, why would greater resources be necessary to do something that was previously provided for in the budget process?

Dr. CUSTIS. Sooner or later, Mr. Hammerschmidt, I would want John Murphy to answer at least a portion of that question. If I may ask him to start, then I will add to his remarks.

Mr. HAMMERSCHMIDT. Please proceed.

Mr. MURPHY. I am actually quite embarrassed to have to start out by asking our own panel a question, which is, previously, in practice, was there a distinction made as to whether a private physician's prescription was for service-connected or non-service connected disability?

Dr. CUSTIS. There was not.

Mr. MURPHY. That would be the answer, Mr. Chairman, that under prior practice no effort was made to ascertain whether the prescription was for the care of a service-connected or for non-service connected condition.

Mr. HAMMERSCHMIDT. Well, apparently, you had money in your budget to fill these prescriptions before the legal issue arose, before your counsel made that ruling and I wonder why it would cost you extra now if we legislate to erase that counsel's decision, that legal issue.

Mr. MURPHY. As to what was in the budget, I would have to defer to Dr. Custis.

Dr. CUSTIS. I think we are talking, Mr. Hammerschmidt, more about a cost avoidance than a cost savings. But you are absolutely right. The costs of providing this service came out of funds that were available. The use of those funds for this purpose has been discontinued; as a result we have already achieved an estimated $6.4 million cost avoidence.

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[1] See p. 72.

Mr. HAMMERSCHMIDT. So it is really a budget bookkeeping item rather than a real tangible cost savings?

Dr. CUSTIS. Well, it's tangible in that money previously used for this purpose has been applied to our total drug bill. Our total drug bill has gone up precipitously. In 1980, it was around $250 million. In 1983, it was $435 million. More and more new and expensive medications are coming on the market and we expect that this new escalation in cost is going to continue.

The cost avoidance, were this proposal not to be enacted, would be in the neighborhood of $6.4 million a year.

Mr. HAMMERSCHMIDT. You had a comment, Ms. Quandt?

Ms. QUANDT. Yes, I would like to add that the provision of prescription drugs here at issue was not based on any policy. There were no published policies from central office which authorized VA medical centers to furnish these medications. Therefore, where it occurred there had been no review of those prescriptions. With passage of this bill, however, we would be required to be certain that prescription coming in is for a service-connected condition. That accounts for the administrative add-on.

Mr. HAMMERSCHMIDT. I see. Well, as I mentioned in my opening statement, and perhaps the chairman did, too, that should we enact this legislation, we, obviously, would want safeguards written in the rules and guidelines by the VA to protect the public interest.

Mr. EDGAR. Would the gentleman yield?

Mr. HAMMERSCHMIDT. I yield to the chairman.

Mr. EDGAR. In your opposition you state that you have certain problems of moving back to the way in which you handled it prior to the decision by your counsel not to provide that service. If Congress mandates, by passing the law, which you are opposed to, can you handle it?

Dr. CUSTIS. Yes, sir, we wouldn't have any choice and we would.

Mr. EDGAR. So that all of the rules, regulations, procedures, how to do it, you could handle?

Dr. CUSTIS. Yes, sir.

Mr. EDGAR. Thank you.

Mr. HAMMERSCHMIDT. Thank you, Dr. Custis, for your responses. I am going to move on to another area now because I am going to have to leave for another commitment. But I know that my colleagues probably want to pursue that issue a little further.

Let me change over to the security issue briefly, Dr. Custis, and you may want Mr. Fasone to respond to this, on a provincial matter, I would like for you to please elaborate on your security employee training program in Little Rock, Ark.

Dr. CUSTIS. I would like Mr. Fasone to respond except to say that I have always had the impression and been reassured that it was a very valuable program and it's doing an excellent job.

Mr. FASONE. Our 40-hour training program at Little Rock, Ark. is based upon the qualification requirements of each of our police officers as having included 2 prior years of police experience or the substitute education. In other words, we don't bring in recruits to the VA. We bring in people who have served with full power of police arrest authority granted by other governmental agencies—local, State, or Federal.

The purpose of our 40-hour training program right now is to bring these people into a full Federal and VA orientation to outline to them what our internal requirements and day-to-day operations are.

Mr. HAMMERSCHMIDT. I wonder if you would elaborate on the issue of your security employees carrying loaded firearms. Please give us the pros and cons of the way you view that matter.

Mr. FASONE. I view it as unnecessary. The experiment that we have carried on for the past 11 years has been so successful that we have pretty much proven that, as in the tradition of the British police department, that it is not necessary for a peace officer or a constable to always carry a firearm. I think our track record clearly indicates the success of this.

We do feel, thinking ahead, that if there is a national emergency, such as an international conflict, that we will lose a considerable number of our police officers to military duty and that our drug supplies do become frantically needed by the same element in the community, at that point we would very seriously have to go to firearms.

Mr. HAMMERSCHMIDT. Have any of your officers ever been wounded or killed because they couldn't protect themselves from lack of loaded firearms?

Mr. FASONE. In the past calendar year, one of our officers was shot in the thigh while trying to disarm a patient who was brandishing a .45 caliber automatic. Yes, we do have instances such as that.

The officer was disarming the offender, who was a deranged psychiatric patient, by the way. We feel that as long as the officer does not have to make a weapon selection, which calls for taking a .38 from his holster and shooting the patient, that he will be forced to resort to every possible means available to dissuade the person to bring a successful conclusion to the incident and so far it has worked beautifully.

Mr. HAMMERSCHMIDT. Well, to your knowledge, does the private sector or other governmental hospital, such as State, county or city, have security employees who have loaded guns?

Mr. FASONE. To my knowledge, most of them do.

Mr. HAMMERSCHMIDT. On a less violent part of your security, you mentioned pilferage, embezzlement, that sort of thing. One of our staff people brought to my attention that up at the Roosevelt Hospital in New York the loss of linen and towels and those sorts of things is a major cost in their overhead in that hospital. I am sure that must be a major part of your security apparatus' concern.

Mr. FASONE. It certainly is and we are taking steps. We have an initiative going right now which employs the use of our undercover people in trying to determine the major reason for our loss of linen. We have a careful, structured investigation underway at this time.

Mr. HAMMERSCHMIDT. Dr. Custis, I am assuming that in your accounting structure that some way those losses show up. Can they be quantified, identified on a hospital-by-hospital basis? Do you have any such records on what the losses are?

Dr. CUSTIS. Ms. Quandt assures me that we can provide that for the record.

Mr. HAMMERSCHMIDT. If you would, I think it would be helpful to us to get a figure on what's occurring there.

Ms. QUANDT. We can tell you two ways. One is from the incident report of the security service. The other is from building management service where we have a linen control report.

[Subsequently, the Veterans' Administration furnished the following information:]

The Building Management Service of DM&S requires medical centers to conduct semi-annual inventories of linen supplies and to submit their linen inventory control reports to central office for analysis. A tabulation of linen losses for the most recent six month period was prepared. This material follows:

LINEN INVENTORY CONTROL REPORT

The following list contains the indicated linen loss by medical center. These figures are from the Linen Inventory Control Report (RCS-13-51) which was conducted during January 1984. This report is based on the raw data received on these reports, and have not been through any analysis. The dollar value indicates the computed cost of difference found in that inventory and would include in addition to any loss, replacement of fair wear and tear, mis-used linen, hoarded linen and poor counting techniques.

Albany, N.Y	$34,478
Albuquerque, N. Mex	5,619
Alexandria, La. (Shreveport—Egland AFB Hosp.)	38,714
Altoona, Pa	3,201
Amarillo, Tex	2,024
American Lake (Seattle)	36,883
Asheville, N.C	29,186
Batavia, N.Y	10,089
Bath, N.Y	23,199
Battle Creek, Mich. (Ann Arbor—Allen Park—Saginaw)	178,711
Bay Pines, Fla. (Tampa—MacDill AFB)	64,518
Bedford, Ma. (West Roxbury—Hanscomb AFB)	59,261
Big Spring, Tex	15,378
Biloxi, Miss. (Jackson—New Orleans)	170,256
Boise, Idaho	6,385
Bonham, Tex	3,978
Brockton (Boston)	107,562
Brooklyn, N.Y	64,975
Buffalo, N.Y	31,798
Butler, Pa	6,202
Canandaiagua, N.Y	13,767
Chillicothe, Ohio	42,544
Clarksburg, W. Va	13,103
Cleveland, Ohio	52,064
Coatesville, Pa	18,892
Columbia, Mo	16,740
Dallas, Tex	32,198
Danville, Ill	18,848
Dayton, Ohio (Cincinnati)	38,663
Denver, Colo. (Cheyenne)	25,578
Des Moines, Iowa	10,677
Erie, Pa	11,702
Fargo, N. Dak	8,555
Fayetteville, Ariz	1,742
Fayetteville, N.C	11,702
Fort Harrison, Mont	4,413
Ft. Lyon, Colo	19,995
Fort Meade, S. Dak	7,490
Fresno, Calif	5,593
Grand Island, NB	1,370
Grand Junction, Colo	4,615
Hampton, Va	15,453
Hines, Ill. (Chicago West Side—Chicago Lake Side)	287,423
Hot Springs, S. Dak	1,545

Houston, Tex	43,474
Huntington, W.Va. (Beckley)	17,472
Iron Mountain, Mich	7,577
Kerrville, Tex	8,296
Knoxville, Iowa (Iowa City)	21,100
Lake City, Fla. (Gainesville)	54,375
Leavenworth, Kans. (Topeka—Kansas City)	112,910
Lebanon, Pa	16,588
Little Rock, Ark. (Memphis)	131,939
Louisville, Ky. (Lexington)	32,311
Lyons, N.J. (East Orange—Newark OPC)	136,456
Madison, Wis	15,279
Manchester, N.H. (White River Junction)	13,884
Marion, Ind. (Fort Wayne)	225,484
Martinsburg, W. Va. (Wash., D.C.—Harpers Ferry Natl. Park Svc)	104,506
Miami, Fla	71,797
Miles City, Mont	1,278
Minneapolis, Minn	75,151
Mountain Home, Tenn	9,017
Murfreesboro, Tenn (Nashville—Knoxville OPC—839 TAC Hosp USAF)	36,537
Muskogee, Okla	9,684
Northampton, Mass	24,636
North Chicago, Ill. (USNH Great Lakes)	44,481
Northport, N.Y	70,481
Oklahoma City, Okla	974
Palo Alto, Calif. (Livermore—Martinez—San Francisco)	59,450
Perry Point, Md. (Philadelphia—Wilmington—Baltimore—Ft. Howard—PHS)	147,126
Phoenix, Ariz. (Tucson—Prescott)	45,616
Pittsburgh, Pa. (UD) (Pittsburgh (HD)—Wheeling Sub Clinic)	16,849
Poplar Bluff, Mo	5,467
Portland, Oreg	36,149
Reno, Nev	5,296
Roseburg, Oreg. (White City—Job Corps)	13,201
Salem, Va	26,311
Salisbury, N.C. (Durham)	67,771
Salt Lake City, Utah	24,142
San Antonio, Tex	16,298
San Diego, Calif	26,108
San Juan, PR	62,884
Sheridan, Wyo	6,141
Sioux Falls, S. Dak	6,725
Spokane, Wash	15,824
St. Cloud, Minn	4,506
St. Louis, Mo. (Marion, IL)	40,571
Syracuse, N.Y	15,204
Tampa, Fla	76,314
Togus, Mass	13,935
Tomah, Wash	9,584
Tuscaloosa, Ala. (Birmingham)	46,608
Tuskegee, Ala	43,662
Waco, Tex. (Temple—Marlin)	34,793
Walla Walla, Wash	3,848
West Haven, Conn. (Newington)	48,544
West Los Angeles, Calif. (Sepulveda—Long Beach—Loma Linda)	383,868
Wichita, Kans	836
Wilkes Barre, Pa	6,105
Wood, Wis	40,628
Total	4,192,365

The following list contains those medical centers that have not completed their inventory:

Augusta, GA (Columbia, NC—Charleston, SC—Decatur GA—Dublin, GA) (Exempted this inventory. Indianapolis, IN, Montrose, NY (Castle Point), New York, NY (Bronx), Omaha, NB (Lincoln).

Richmond, VA (Exempted this inventory).

Mr. HAMMERSCHMIDT. Thank you very much, Mr. Chairman.

Mr. EDGAR. Thank you.

Dr. Rowland?

Dr. ROWLAND. Thank you, Mr. Chairman. Mr. Chairman, I have a statement that I wish to submit for the record on H.R. 3876.

Mr. EDGAR. Without objection, your full statement will be made a part of the record.

[The statement follows:]

STATEMENT OF HON. J. ROY ROWLAND, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF GEORGIA

Mr. CHAIRMAN. You are to be commended for holding a hearing on this very important topic. Since veterans did not have the benefit of any type of review of the results of the change in the VA's prescription-dispensing policies, it is all the more important that we review that change at this point.

I represent a largely rural District. In this 30-county area, there is but one VA facility. Although that facility is in my hometown, fortunately I am not in need of its services.

However, there are many veterans for whom access to a VA facility is a hardship in and of itself. Regardless of their particular handicap, the distance alone respresents a burden for many.

The reason I mention this is that it seems that the only factor the VA has considered in this policy change is whether or not the veteran is in need of aid and attendance. Surely this does not represent the only incident of when a veteran is unable to easily visit a VA doctor.

For most of these veterans, their family doctor has been treating them for a number of years. While I understand the VA's concern for the efficacy of the treatment proscribed by private physicians, this treatment cannot be assumed to be any more or less responsible than that proscribed for non-service connected veterans receiving aid and attendance.

And that is what we are facing: two tiers of service for our veterans. I do not believe it is good practice or good policy to establish different standards of treatment for disabled veterans. Not only does this create a morale problem in those whose health is irrevocably damaged by their service to this country, but I am concerned that the rights and benefits of all of our veterans are not even being accorded the same respect as those that are, as a matter of course, doled out to those on various Government assistance programs who may have contributed little to this country. Surely veterans deserve better.

Dr. ROWLAND. Dr. Custis, how long has the VA been allowing VA pharmacies to dispense privately written prescriptions?

Dr. CUSTIS. It is probably difficult to identify when this might have been done outside the framework of our fee-basis program or as authorized under title 38 U.S.C. 612(h), but it began reaching significant proportions in about 1980.

Dr. ROWLAND. What was it that prompted the VA to ask for an opinion?

Dr. CUSTIS. The sheer size of it.

Dr. ROWLAND. The sheer size of it. It was continuing to grow?

Dr. CUSTIS. Yes, sir.

Dr. ROWLAND. I see. In this respect, I have had veterans talk to me about the inability to get their prescriptions filled recently in the VA and also I have had veterans tell me that they have to order their prescriptions by mail. I would like to know what the policy of the VA is about filling prescriptions by mail for people, particularly who are chronically ill who may run out of their medicines before they can receive prescriptions back by mail. I have had some inquiries about this also.

Dr. CUSTIS. Well, the arrangements are in place for refill of prescriptions in time for no lapse in medication. The prescription by mail is an option that the veteran can use. He can also come to our pharmacies and receive medication.

Ms Quandt may want to add to that answer.

Ms. QUANDT. Our goal is to fill prescriptions in-house as much as possible. We pay, essentially, an average of $10.73 per prescription in the private sector compared to about $5.10 within the VA. When a fee-basis patient runs out of his prescription, he may have it filled on an emergency basis. However, if that emergency keeps coming up every month, we would then discuss that with the veteran and help him understand that he needs to mail in his request then farther ahead of the end of his prescription running out.

We also have standards in the various services for filling those prescriptions and there should be a turnaround after the review and check and pharmacy of essentially 3 days.

Dr. ROWLAND. Does he have to send the containers back to get them refilled?

Ms. QUANDT. No.

Dr. ROWLAND. He does not have to do that?

Ms. QUANDT. We have a multipart form for refills. He sends in the form and the new container is mailed back to the patient.

Dr. ROWLAND. Have you had any complaints about veterans being unable to get to VA doctors for care since they now have to have their prescriptions filled in the VA pharmacies?

Dr. CUSTIS. Not as such. Particularly on the part of non-service-connected patients, we are having to cut off access to care in greater numbers then we ever have before.

Incidentally, as we automate our pharmacies, this technique is going to greatly improve our responsiveness as far as prescription refills go.

Mr. EDGAR. Would the gentleman yield at that point?

Dr. ROWLAND. Yes, I yield, Mr. Chairman.

Mr. EDGAR. Would that also cut the cost of this particular bill in terms of computerization and servicing?

Dr. CUSTIS. In terms of labor savings, I think there would be a small, identifiable cost savings.

Dr. ROWLAND. You indicated, Dr. Custis, that if H.R. 3876 were to pass, then this might encourage unnecessary and unwarranted expansion to provide other services in the private sector. I am particularly concerned about veterans who live in rural areas that may be 50 miles or so from a VA facility insofar as care is concerned and also the filling of prescriptions. I see that my time is out. If you could very quickly respond.

Mr. EDGAR. I yield the gentleman one additional minute.

Dr. ROWLAND. Thank you, Mr. Chairman.

Dr. CUSTIS. The service-connected veteran living in remote areas where there is no VA presence has a program designed to meet his need, the fee-basis program, and approximately 11 percent of all of our service-connected patients avail themselves of the fee-basis program.

Dr. ROWLAND. Is there any distance that the veteran has to live from a VA facility in order to be eligible?

Dr. CUSTIS. That's one consideration, but not necessarily the exclusive one.

Dr. ROWLAND. What is the distance?

Dr. CUSTIS. 50 miles.

[Subsequently, the Veterans' Administration submitted the following clarifying information:]

There is no standard formula for determining geographic accessibility. This determination is made at each VA medical center based upon local conditions.

Dr. ROWLAND. Thank you, Dr. Custis.

Thank you, Mr. Chairman.

Mr. EDGAR. Dr. Custis, following up on that question before we move to our next questioner, in your opinion, what is the major policy difference between our bill and the fee-basis program in providing medicine to service-connected veterans?

Dr. CUSTIS. Mr. Chairman, I was indirectly warned by Rufus Wilson not to use the term mainstreaming. I can appreciate why. We don't want to make it our latest Washington Monument. But I can't avoid its reference in answering your question. I think what really gives us pause for concern is that this is, indeed, in principle, a form of mainstreaming.

Mainstreaming,to me, represents a situation in which we have no control over the purchase of services from the private sector and the veteran has free choice to go seek his care wherever he might want it. I think, if we do this for drugs today, we can do it for laboratory services tomorrow and then, why not also down the road toss in the private physician's fee? That is mainstreaming.

We spend almost 10 percent of our medical care budget in purchase of services from the private sector. But in all cases we determine when it is needed. The day that we let the patient decide, we are into mainstreaming.

Mr. MURPHY. Mr. Edgar, if I could add to Dr. Custis' response, as a matter of law, under section 601(4) of title 38, fee-basis care is considered part of the care furnished by the VA.

Mr. EDGAR. Let's take the illustration of a rural veteran who was, prior to the change of regulation, going to his private physician, getting a prescription, having the VA fill it and suddenly you have changed the regulation. He now has two options. One is, he can come to the VA at long distance, use that VA, get VA services and get his prescription. The other is he can apply for a fee-basis card and now you are going to go back and you are going to pay for both his physician and his medicine.

Dr. CUSTIS. That's right, which reminds me of a statement which I think you made, Mr. Chairman, in your opening remarks, that in the long run enacting this bill would result in cost savings, because, otherwise, we would be paying for the individual's entire care. I think I am inclined to state that in a little different way. If all of the service-connected patients that have elected to pay for their own care were to come to us, the lower priority, nonservice-connected veteran would be denied service. In other words, it is not a matter of VA's increasing its expenditures. Once you decide on our medical care budget, it is handled to take care of as many patients as we can care for, and, consistent with law, directors stay in

the black in their budget by cutting off care at the low priority level.

Mr. EDGAR. What you are saying is it won't cost anymore because you are only going to freeze out the non-service-connected people to fill the gap with service connected either fee basis or in-house care.

Dr. CUSTIS. Exactly, the short run. Our long range plans would continue to address the needs of all eligible veterans.

Mr. MURPHY. Mr. Chairman, could I just add a point of clarification in response to you earlier question? There was no change in regulation or law or anything else. The law did not authorize the provision of the benefit. It was not provided for by regulation, manual provision, or circular.

Mr. EDGAR. You corrected your illegal action.

Mr. MURPHY. That's right. What grew apparently just grew in practice. It's my understanding that it was somewhat sporadic, albeit maybe widespread. It just wasn't done consistently around the country.

Mr. EDGAR. Thank you.

Mr. Hillis.

Mr. HILLIS. Thank you, Mr. Chairman. I have just got a couple of questions, Dr. Custis, because you have covered some of the areas that I was going to inquire about. I think it's pretty clear now, as I analyze this last series of this colloquy and the answers that you gave to the chairman's questions, that the budget dollars will control who is going to get the care. In other words, the dollars will not be enlarged to take care of the non-service connected who are waiting at the back of the line in the outpatient clinic. Is that right?

Dr. CUSTIS. Yes, sir, in the short turn. Our longer turn plans would anticipate meeting both needs.

Mr. HILLIS. Okay. Now would it be possible to review the rules on allowing fee-basis treatment in areas closer than 50 miles that would, say, cover veterans who, because of their employment, need service or care at times when the VA isn't available—I am thinking of nights, weekends, that sort of thing—for people that are trying to work it and pay their full load in society and can't fit their care program into the VA schedule? Is there some way to meet that problem so that that veteran can have some freedom of choice?

Dr. CUSTIS. In our granting of fee-basis authority, every consideration is given to the veteran's situation as to why he can't avail himself of VA-provided care.

Ms. Quandt would like to respond further.

Ms. QUANDT. What has happened in some of our facilities when there is demand on the part of veterans who are employed and don't want to lose time from work is that we have gone to evening ambulatory clinics and Saturday clinics. Those are alternatives to the type of problem you are discussing.

Mr. HILLIS. I take it that's not the usual procedure. That's, would you say, rare or is it——

Ms. QUANDT. I think it occurs largely in our urban centers more than the rural hospitals.

Mr. HILLIS. Just sitting and listening to the hearing today has been very informative. Would it be possible by studying this area of rules to perhaps come up with a plan that would perhaps make this legislation unnecessary? With an act of Congress, you may be legislated into some rigid system that may have faults or problems with it that are a different set of problems than you face now, and force you to do things that are inefficient or inequitable in other ways.

Have you given any consideration to trying to review the present rules?

Mr. MURPHY. Excuse me, Mr. Hillis, if I can rephrase your question since I was, I beg your pardon, looking at a statute. Well, your question is, Could we look at this on a regulatory basis without the necessity for congressional action?

Mr. HILLIS. Yes.

Mr. MURPHY. The answer is yes. Yes, we have some considerable discretion granted by Congress to look at this.

Mr. HILLIS. I want to turn to the security areas for a minute. I am certainly impressed with the statements made here this morning about the way you are trying to handle the situation in the VA system without the use of deadly force and firearms.

Do you have programs in many of these hospitals where you go through and check the patients themselves after they are admitted for weapons and instruments that could be used in taking drugs or in generally illegal purposes?

Mr. FASONE. Yes, sir. Within the psychiatric or the mental health care program, our chiefs of psychiatry services do have programs to fit their particular needs, fit their particular ward. There are inspections of bedside stands and lockers periodically—that may be twice a day in some circumstances—to make sure that a patient doesn't have a book of matches with which he could do harm to himself or others, and certainly that he doesn't have drugs, alcohol, or weapons.

Mr. HILLIS. Well, it's my understanding from some of the information received since the hearing started that in one VA hospital, I think in Chicago, you actually, in such a sweep, turned up an automatic weapon, a submachine weapon. Is that correct?

Mr. FASONE. Well, that was quite a few years ago at our spinal cord injury service at Hines we turned up in a sweep some shoulder-held weapons, including a submachine gun. That condition was corrected many years ago.

Mr. HILLIS. You don't have that problem today?

Mr. FASONE. No, sir.

Mr. HILLIS. All right. Thank you very much.

Mr. EDGAR. Thank you.

Mr. Penny.

Mr. PENNY. Thank you, Mr. Chairman.

Congressman Rowland and others have covered most of the questions that I wanted to ask on H.R. 3876. So I will simply ask a couple of questions on the security measure, H.R. 4792. Do you have documentation on the severity of drug-related crimes and drug thefts in the VA facility and, if you can share that information with us now, I would appreciate it, or if you need to document that and submit it, that's fine, too.

Mr. FASONE. We can certainly provide the information you have requested, but we don't have it with us today. We certainly have it in our Uniform Monthly Crime Report. We have an automated reporting system coming in every month. It does reflect specifically narcotic thefts. In our daily offense report system, we do require that any incident, whether it be felony or misdemeanor, if it is drug related, we require that a report be sent.

[Subsequently, the Veterans' Administration furnished the following information:]

Through the DM&S Uniform Monthly Crime Report drug theft and attempted theft incidents are monitored. This report also distinguishes between patients, nonpatients and employees as offenders or victims in the categories of crimes against persons. A copy of the last complete fiscal year report is furnished.

Fiscal Year 1983 Totals — DMGS UNIFORM MONTHLY CRIME REPORT — BATL RCS ID-259

FOR PERIOD ENDING SEP 30, 1983

TOTAL ALL STATIONS

CATEGORY	ITEM	NUMBER OF OFFENSES CURR MO -A-	NUMBER OF OFFENSES FYTD -B-	TOTAL DOLLAR LOSS CURR MO -C-	TOTAL DOLLAR LOSS FYTD -D-
FORCED ENTRIES	CANTEEN	1	17		
	CASHIER		1		
	PHARMACY		6		
	LOCKER AREAS	25	148		
	ALL OTHER AREAS	47	519		
	TOTAL	73	691		
THEFTS:					
PERS PROP	$50 AND ABOVE	369	4,610		
	LESS THAN $50	604	7,613		
	TOTAL $ LOSS			164,825	1,425,705
GOV'T PROP	$50 AND ABOVE	215	2,426		
	LESS THAN $50	149	2,053		
	TOTAL $ LOSS			106,528	1,728,940
COIN-OP MC	TOTAL THEFTS	21	243	838	14,117
AUTO	GOV'T VEHICLES	1	8	4,500	57,300
	PRIVATE VEHICLES	24	297	86,600	1,604,111
DRUGS	TOTAL THEFTS	13	249		
	ATTEMPTED THEFTS	5	69		
TOTAL THEFTS AND DOLLAR LOSS		1,396	17,499	363,291	4,830,173
ROBBERY	ARMED		16		
	STRONG-ARM	7	64		
	$50 AND ABOVE	4	32		
	LESS THAN $50	3	45		
	DRUGS ONLY		3		
TOTAL ROBBERIES & DOLLAR LOSS		7	80	1,879	17,323
TOTAL THEFT & ROBBERY & $ LOSS		1,403	17,579	365,170	4,847,496
VANDALISM	BY: PATIENTS	65	858		
	EMPLOYEES	12	159		
	OUTSIDERS	98	1,527		
TOTAL VAND. AND DOLLAR DAMAGE		175	2,544	15,456	302,910
TRAFFIC	COURTESY PARK.VIO	14,160	164,182		
	MOVING VIOLATIONS	417	6,092		
	DIST.CT.VIO.NTS.	4,267	48,341		
	TOTAL	18,844	218,615		
OTHER OFFENSES	ARSON	8	140		
	ARSON $ DAMAGE			11,183	37,277
	INTRO/POS-LIQUOR	480	5,002		
	DRUGS	92	1,333		
	REC/SELL STL PROP	3	35		
	WEAPON POSSESSION	417	3,935		
	VICE SOLICITING	4	60		
	TOTAL	1,004	10,505		

CATEGORY	ITEM	NUMBER OF OFFENSES CURR MO -E-	NUMBER OF OFFENSES FYTD -F-
ASSAULT	W/DANGEROUS WEAPON	20	199
	NO WEAPON	32	455
	SIMPLE ASSAULT	281	3,454
	BY: PATIENTS	273	3,482
	EMPLOYEES	16	182
	OUTSIDERS	36	396
	UNKNOWN	7	44
	VICTIM: PATIENT	177	2,073
	EMPLOYEE	142	1,886
	OUTSIDER	14	143
	TOTAL ASSAULTS	333	4,108
RAPE	FORCIBLE		9
	ATTEMPTED	3	12
	BY: PATIENTS	3	11
	EMPLOYEES		3
	OUTSIDERS		3
	UNKNOWN		4
	VICTIM: PATIENT		8
	EMPLOYEE	3	8
	OUTSIDER		5
DISTURBANCE	OUTSIDER	698	9,582
	EMPLOYEES/PATIENTS	2,815	26,710
	BOMB THREATS	11	126
	THREATS TO EMPLOYEES	335	3,660
	TOTAL DISTURBANCES	3,859	40,078
MANSLAUGHTER	NEGLIGENT		1
	NON-NEGLIGENT		1
	BY: PATIENTS		2
	EMPLOYEES		
	OUTSIDERS		
	UNKNOWN		
	VICTIM: PATIENT		5
	EMPLOYEE		
	OUTSIDER		15
STOPS/ARRESTS (NON-TRAFFIC)	STOPS FOR QUESTION.	1,687	12,968
	PHYSICAL ARRESTS	203	3,682
	ARRESTS THRU U.S.		
	DIST.CT.VIOL.NTS.	1,136	2,731
TOTAL ALL ACTS COMMITTED		25,686	294,062
TOTAL ALL ATTEMPTED ACTS		8	81
TOTAL ALL DOLLAR LOSS		391,809	5,187,683

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Mr. EDGAR. Would the gentleman yield?

Mr. PENNY. Do you have any general observations about the relationship of crimes that involve drugs to other incidents of crimes committed in the VA facilities?

Mr. FASONE. I know what you are trying to ask and I read you. It is a very difficult thing to categorize and to keep track of which crimes were committed because there was a drug purpose for the crime. All I can say in general is that we have seen this last 6 months—we have seen a resurgence throughout the country of increased drug usage, especially marihuana and cocaine.

Mr. EDGAR. Would the gentleman yield?

Mr. PENNY. I would.

Mr. EDGAR. Could you submit for the record some overview of 1983 and the generalized categories of drug and theft and those areas? Is that potentially possible for the record? I am not asking for great detail, but just some overview of the major category areas.

Mr. FASONE. I mentioned and have submitted to the reporter already the overview for 1983 and for four previous years. Are you asking specifically——

Mr. EDGAR. If you have already provided that for the record, that's fine I just haven't seen it.

Mr. FASONE. Yes, sir, it's in the record now.

Mr. PENNY. In that documentation, does it delineate between patients and nonpatients who are involved in these crimes?

Mr. FASONE. Yes, sir, our reporting system is quite detailed. It delineates, for instance, especially on crimes against a person, namely assaults—it does delineate who committed the crime, whether it was a patient, visitor, or an outsider and who was the victim of the crime. So we do have a complete breakdown for you on that.

Mr. PENNY. All right. I would appreciate that.

In your training program for security personnel, are you satisfied that the level of training is comparable with the kind of training that is provided for security personnel for law enforcement agencies, and other entities?

Mr. FASONE. I can't say we are completely satisfied, no. We do have the hopes and the intentions to expand from 40 hours to 68 hours to give our people more actual role playing type training to prepare them better for actual incidents.

Mr. PENNY. Is there an easy transferability from security work for the VA into other law enforcement and security positions?

Mr. FASONE. Well, there must be because an awful lot of our people leave us to go to customs, postal, and all of the other Federal agencies.

Mr. PENNY. That must be an indication that, to some extent, the training you are giving them is preparing them for work elsewhere.

Mr. FASONE. Yes; I think the other agencies appreciate their experience with us.

Mr. PENNY. And last, are you satisfied with the number of positions that you have in the security division?

Mr. FASONE. We are satisfied with the presupposition that each and every man that we have or authorized meets our standards

and stays with us following training. We feel we can do the job well with the numbers of people we have. But we don't necessarily feel that more is better.

Mr. PENNY. OK. If I might follow up with one last question on that point. Is the decision about the complement for the security division an internal decision? Could the Administrator authorize additional personnel if you demonstrated the need for it or is there a lid that we would have to address legislatively?

Mr. FASONE. Well, it would reach the Administrator's level. It's an internal DM&S matter and any medical center director out there who had a shortage which endangered his patients and property would certainly find his problem quickly corrected by the Chief Medical Director.

Mr. PENNY. Thank you.

Dr. CUSTIS. Mr. Penny, may Ms. Quandt add to that?

Mr. PENNY. Sure.

Ms. QUANDT. With respect to a specific VA medical center, that medical center, when it receives its projected funding, is given a ceiling of personnel. Each director, based upon a position management committee and the requirements of priorities for various types of staff, is free to assign staff where necessary. Therefore, if a director feels the need for five more FTE in security, he may place them there. That is a decentralized, local decision based upon local need.

Mr. EDGAR. Mr. McEwen.

Mr. MCEWEN. Thank you, Mr. Chairman.

Dr. Custis, to follow up on the chairman's questions of a few moments ago, in your testimony you said, "It is important to note that all veterans who would benefit from enactment of H.R. 3876 are now eligible to receive care for these disabilities in either VA facilities or if necessary, under the VA-approved fee arrangements program." Wouldn't that be more expensive than what is being proposed here?

Dr. CUSTIS. I believe this is similar to the exchange that went on between the chairman and myself.

Mr. MCEWEN. Exactly.

Dr. CUSTIS. If the 11 percent of service-connected veterans that are purchasing prescriptions and letting us know of their presence were to come into the system for full services; yes, it would utilize resources to care for them, but it wouldn't necessarily result in increased budget levels.

Mr. MCEWEN. Because it would eliminate people from the system.

Dr. CUSTIS. Right.

Mr. MCEWEN. So, in other words, it's going to be more expensive under the proposal, either forcing them in or forcing them to use the fee-based—it would be more expensive than if they were allowed to continue the program that we had up until last year. Correct?

Dr. CUSTIS. Correct.

Mr. MCEWEN. Less people will be forced under H.R. 3876——

Dr. CUSTIS. It would be less expensive to provide them their medications, but to provide for full services that they are not asking for now, it would take more resources.

Mr. MCEWEN. Therefore, H.R. 3876 would be less expensive than continuing the current program which forces them to come to you, as you said in your testimony on page 3.

Dr. CUSTIS. No, we believe it would be more expensive. As long as all they are asking for is drugs, we estimate that the additional cost would be approximately $6.4 million.

Mr. MCEWEN. Super. Thank you.

Mr. EDGAR. Would the gentleman yield to that point?

Dr. Custis, one of the statements that you do make in your testimony is that the average number of prescriptions filled would be 36. Is that correct?

Dr. CUSTIS. That's based on experience.

Mr. EDGAR. What kind of experience? Do you have summaries of that? Where do you get the data of 36?

Dr. CUSTIS. It's based on how many prescriptions on the average an individual patient receives and how many refills are utilized per year on that prescription. Yes, we can give you the factual basis for those estimates.

Mr. EDGAR. Is that only for service-connected disabilities?

Dr. CUSTIS. That's experience with service-connected patients in general.

Mr. EDGAR. It sounds like a lot to me that you would have 12 months and you would have three separate prescriptions per month per patient. It sounds awfully high.

Dr. CUSTIS. That is not the in the category of polypharmacy. We have some examples that are tremendously higher than that. That is not unusual.

Mr. EDGAR. I can understand it for a very, very sick patient. I just need to look at the data a little more carefully because 36 just sounds like a lot. We have access to outpatient facilities here on Capitol Hill and I would be surprised if there are too many Congressmen who are over there for 36 prescriptions during the course of 1 year, even though they are free. Well, I'll check that out.

Mr. MCEWEN. Mr. Chairman? Dr. Custis, just for my own edification, as I learn in the process, on page 4 of your testimony you said that:

> The VA would support enactment of H.R. 4694 only if it were amended to restrict the granting of waivers to doctors who are, one, specialists in scarce specialties; two, needed for high level management positions in DM&S; three, employed at facilities with unusual recruitment problems.

Who, if I may ask, came up with these criteria?

Dr. CUSTIS. The last time that this legislation was considered in testimony, there was sort of a consensus between the committee and our staff that this was the sort of criteria that one could justify the use of the exemption. Yes, it is our existing criteria and the question is, "Who came up with it?"

Mr. MCEWEN. I was just curious. Does OMB help you think these things up or do you do it on your own?

Dr. CUSTIS. No, sir. These are our own criteria.

Mr. MURPHY. We previously had, through OPM, delegation of the Title V authority do this, which just expired and, hence, the need to relook at it, and this is the criteria the agency was using to make the decision of when to grant them.

Mr. MCEWEN. I find that interesting.

Mr. PRICE. I would just like to add to that. That is the criteria—the general criteria you stated is consistent with the criteria that is in our own VA Personnel Operating Manual outlining to the field facilities what documentation they need to submit for review in approving a waiver request.

Mr. MCEWEN. All right. Thank you.

Before hiring authority expired with respect to retired military physicians, how many had been hired, and for my own benefit, and how much impact would this legislation have?

Dr. CUSTIS. Well, I think in the statement they figure that over a two-year—is it——

Mr. MURPHY. Three years.

Dr. CUSTIS. The last 3 years we have utilized this for 26 hires. To put that in its proper perspective, we have 12,000 physicians in the system.

Mr. MCEWEN. Thank you. I must have missed that.

Mr. EDGAR. Marcy, do you have any questions at this point? You are wearing your lovely prom flower today.

Ms. KAPTUR. Thanks to the VFW.

Mr. MCEWEN. I object. I didn't get one. [Laughter.]

Ms. KAPTUR. I noticed that. They do discriminate.

Mr. EDGAR. Without objection, a flower will be ordered for Mr. McEwen. [Laughter.]

Ms. KAPTUR. I had one question which is really in the nature of a clarification. Dr. Custis, in his testimony—let's see if I can find it here—talked about a study on page 11—OPM is currently engaged in a study of the police occupation in order to develop revised qualifications and classification standards and then, Mr. Fasone, on page 2 of your testimony, you talked about some of the difficulties that you have had with OPM in the data that you have to submit to justify increases over the average starting salary. I am just curious as to when that study might be finished and whether you think things are moving along in a way that we could get rid of some of this bureaucracy that seems to be preventing really competitive recruitment at the VA in the law enforcement area.

Mr. FASONE. The office from which Mr. Price works—they are our personnel representatives—his office has a tighter or a closer handle on the progress of that arrangement with OPM to do that study. Perhaps Jack can answer that.

Mr. EDGAR. I would like, in the answer to your question, if you could give us the status of the study, the time it started, when it is going to be completed?

Mr. PRICE. Well, Mr. Edgar, I don't have that information. I will have to supply that for the record. I was not prepared to respond to that. I can give you those specifics.

Mr. EDGAR. That study has not been suspended, has it?

Mr. PRICE. Not to my knowledge, no, sir. I would not be optimistic in seeing any immediate relief coming from OPM as a result of that study.

[Subsequently, the Veterans' Administration furnished the following information:]

The OPM study on the non-supervisory police officer occupation started in July 1983 and had a projected completion date of October 1984. This study is presently on hold along with all other OPM occupational studies. The hold is apparently the

result of a GAO report which was critical of the way OPM conducted such occupational studies.

The VA has been informed that OPM does not expect to resume the police study until at least October 1, 1984. If they hold to that date, with no further delays, it will be the summer of 1986 before a revised police officer standard is available for use at all VA medical centers.

The VA also pledged $10,000 to OPM to help complete the study. However, the Agency has not yet been billed for any funds.

Mr. EDGAR. Does anyone know whether that study was started about 3 years ago?

Ms. KAPTUR. Oh, my goodness.

Mr. PRICE. I don't have that specific information.

Mr. FASONE. No, this particular study—there is one going all the time—this particular study, to which we have had to contribute $10,000, was initiated roughly November 1983. The target date for the completion of the study—and it's just a target date—we have been informed by OPM is 1985.

Now, based on the results of that study, however, OPM will then decide whether or not to revise a police officer classification system. If there is a decision to go ahead and revise it, why, then we begin another click-off of years until such a classification study may be published, which may bring us back up to 1987. So it's very undefinitive at this point.

Mr. EDGAR. Are the same people doing this study that are doing the Agent Orange study? [Laughter.]

Ms. KAPTUR. This doesn't sound real good to me. I don't know how long I am going to be here so I like to see things move along quickly.

I am curious. Could you be a little more specific, what kind of bureaucratic nightmare do you get caught in when you try to upgrade a position so that it's competitive in a region with other law enforcement authorities. You make some reference to it here. "Considerable amount of data on the extent of our problems and the competition we are trying to meet." But when you present that information you say, "You have difficulty in meeting the laws, criteria, as interpreted by OPM." What does that mean?

Mr. FASONE. I think Mr. Price could better answer that since he is our personnel officer.

Mr. PRICE. The Office of Personnel Management requires a great deal of specific information with regard to any request for a special rate that goes in from any Federal agency, be it the VA or any other agency. The OPM regulations under title V require that there be a significant recruitment/retention problem and this has been the major area of contention between the VA and OPM over the interpretation of that word "significant." Many times we submit data that we, in the VA, have been able to support, feeling that it demonstrates that a field station is having a severe recruitment problem and, yet, the Office of Personnel Management will disagree with us on the meaning of the figures as to their significance.

Ms. KAPTUR. If you were God and you could remedy the problem you are facing in that regard, as you thought about it, what would your recommendation be?

Mr. PRICE. In my opinion, the approach that Dr. Custis mentioned in his opening statement with regard to the pay setting au-

thorities under 4107(g) of title 38 would be appropriate. Those authorities, which were enacted into law for the VA in Public Laws 96-330 and 97-251 are about to be utilized by our field facilities and will allow the VA to set above minimum entry rates for a number of health care occupations. It is my opinion that this would relieve many of the recruitment/retention problems for VA police officers.

Ms. KAPTUR. So essentially you could skirt OPM?

Mr. PRICE. VA would have the authority to set special rates within house. I would not say we could skirt OPM because the President has delegated to the director of the Office of Personnel Management the veto authority to veto any special rates approved by the Administrator.

Ms. KAPTUR. Well, Mr. Chairman, how can we be helpful so that they can get through? If OPM keeps blocking them, what recourse do we have? It seems ridiculous that this just drags on.

Mr. EDGAR. Well, we are actually deciding to bypass OPM with our legislation. We are simply suggesting that OPM is the obstacle at this point.

Mr. PRICE. In my opinion, it would help if the Administrator was given the authority under 4107(g) to set special rate authorities and have the police officers exempted from the OPM veto, much as was done with the LPN's, physical therapists and registered respiratory therapists in Public Law 98-160. This would be of significant benefit to the agency.

Mr. EDGAR. Our bill does that but not in that section of the law.

Mr. PRICE. Yes, sir, that's correct.

Ms. KAPTUR. Thank you, Mr. Chairman.

Mr. EDGAR. Could anyone on the panel provide us for the record the cost of the OPM study? Could you ascertain from OPM what the cost of that is?

Mr. MURPHY. Mr. Chairman, I will undertake to ascertain when it started and the other questions you have brought up as well as endeavor to get cost estimates from OPM.

[Subsequently, the Veterans' Administration furnished the following information:]

STATUS OF OPM POLICE OCCUPATION STUDY

Since July 1983, the Office of Personnel Management [OPM] has been conducting a study of the police occupation in order to develop revised classification and qualification standards to be applied Government-wide. This study has been funded in part by the agencies involved. The Veterans Administration's Department of Medicine and Surgery has committed $10,000 to support the study. We have now confirmed that all classification studies being conducted by OPM, including the police study have been put "on hold." Reportedly, the Government Accounting Office has issued a report critical of the procedures OPM uses in classification studies and the standards developed by such studies. We are also informed that OPM will not be able to resume its study of the police occupation for six months.

Mr. EDGAR. Thank you.

I was tempted when Marcy asked you the God question to comment on Mr. Devine, but I chose not to. [Laughter.]

Mr. Slattery.

Mr. SLATTERY. Mr. Chairman, I have just one question. The more I listen to this conversation, the more confused I get, Dr. Custis, as to why you are opposing H.R. 3876. Could you restate again, espe-

cially in light of what you told Mr. McEwen, exactly why you are opposing H.R. 3876?

Dr. CUSTIS. We are opposing it because of what, in our minds, it represents in the way of precedent.

Mr. SLATTERY. But with respect to the legislation itself, as it applies only to drugs, and in response to Mr. McEwen you indicated that, in effect, this would result in cost savings with respect to the drug issue and that's all, I understand, H.R. 3876 really does.

Dr. CUSTIS. It would result in cost savings were the individual who now is involved in——

Mr. SLATTERY. Utilization of non-VA physicians were to utilize VA physicians.

Dr. CUSTIS. Were he to make that decision to come into the VA for care——

Mr. SLATTERY. Or if he were to utilize the fee-basis approach?

Dr. CUSTIS. That's the same thing. That is a part of the system.

Mr. SLATTERY. Well, sure, but I mean you could go to the VA hospital and utilize the VA physician there or, as I understand it, you could also stay in your community and utilize the VA fee-basis program; is that correct?

Mr. MURPHY. If you are service-connected and authorized.

[Subsequently, the Veterans Administration submitted the following additional information:]

In general, a veteran may receive fee-basis services if the VA cannot practicably provide them, if the veteran is service-connected or otherwise eligible and if the veteran has been authorized by the VA to obtain fee-basis care.

Mr. SLATTERY. In either instance, it would result in greater cost to the VA as opposed to what we are talking about in 3876.

Mr. MURPHY. Well, that conclusion is built on a major assumption. I couldn't test the validity or nonvalidity of the assumption that that would be the case.

At some point, you have to assume that those who had been getting just their medicines supplied by the VA, but all of their other care from the private physicians would all come into the VA system for all their medical care needs.

Dr. CUSTIS. And that is most unlikely. The service-connected veteran who is not using the VA system is doing so for a varity of reasons. He either has a private physician in whom he has the utmost confidence and doesn't care to make a change. He, in most cases, can afford to pay for his care and chooses to do so. The VA's denial of a request to fill a prescription is not going to be a strong enough incentive to bring that veteran into the VA system, in my opinion.

Mr. SLATTERY. Restate again, though, your opposition to the bill.

Dr. CUSTIS. The opposition, in essence, is that it creates a situation in which we have no control. We don't know the patient's condition, when we don't see him as a patient. We don't know what medical condition the prescription is for. It is absolutely out of our control. That, in essence, is the same reason that we object to mainstreaming as a concept and, as a precedent, this is a step in that direction.

Ten percent of our medical care budget goes for the purchase of services in the private sector, but in all cases, we are in control, we made a determination of needs, we know what we are buying.

Mr. SLATTERY. OK. I can understand your control argument and I can understand the precedent argument. Now, the last question. As I understood your response to Mr. McEwen's question, the enactment of 3876 would, in your judgment, result in cost savings not cost increase. Is that correct?

Dr. CUSTIS. No, part of that discussion was hypothetical. We believe that there will be increased costs if H.R. 3876 is enacted.

Mr. SLATTERY. So what was your response then to Mr. McEwen, because my understanding of your response to Mr. McEwen was, with respect to drugs, that it would result in cost savings, if we enacted 3876. Did I misunderstand your response?

Dr. CUSTIS. The denial of payment for prescriptions represents a cost savings. If the individual comes into the system either in our hospital facilities or in a fee-basis program—that was Mr. McEwen's counterpoint—that would be an increased cost, to which I agreed.

But the denial of his current free prescription would amount to about $7 million a year savings, unless he elected to make use of his——

Mr. SLATTERY. Will enactment of 3876, in your judgment, cost the VA more money or less?

Dr. CUSTIS. The enactment will cost more. Permitting us to continue under the General Counsel's direction now will cost us less. The legislation that is proposed will cost more.

Mr. SLATTERY. What is your estimate of the cost? Do you have those numbers? Have they been discussed?

Dr. CUSTIS. Yes, sir, it's in the neighborhood of $7 million a year. Those figures were furnished for the record.

Mr. SLATTERY. OK. Thank you.

Dr. CUSTIS. Ms. Quandt is anxious to say something.

Ms. QUANDT. Mr. Chairman, I would like to try a different tack which, I think, must be looked at in the light of what is happening with the total health policy of the country of which veterans are a part.

With the advent of DRG's and with the advent of certain requirements on what Medicare and other organizations are willing to pay for care, either outpatient, inpatient or ancillary services, you could trigger a cost shift into DM&S which is beyond what our conservative estimate is. I think that is what would concern me more than ever.

I believe that the VA could absorb the care in-house of either the 26,000 service-connected veterans to whom we have been giving drugs without proper authority or 44,000 if that is the number. Veterans tend to talk to each other and as soon as a new benefit is passed, it mushrooms. I think you would have to be very careful of the cost shift in what you are doing in total health policy in such legislation.

Dr. CUSTIS. I think that's a very pertinent point. As a matter of fact, on the general subject of cost shifts, we are seeing significant shifts of veterans into the system who have never used it before. As a matter of fact, somewhere between 15 to 20 percent of registrants in our PTF, our patient treatment file, are brand new. They have never used the system before. We ascribe it to two things. One, the reduction in Federal dollar subsidy to medicare and medicaid and

also, we see a higher percentage of this happening in the areas of greater unemployment. We are, indeed, on the receiving end of a cost shift.

Mr. EDGAR. Dr. Custis, to that point, in areas of high, long-term unemployment where people are falling of the unemployment rolls and have little or no health care benefits provided by previous employment, they are shifting to the VA medical system. In areas where they fall through the cracks in the insurance systems around the country, they are using the VA system. Plus, you have the emergence of the aging veteran population which will flood the system at some point and we are already beginning to see that flood in certain parts of the country.

So the point that you are making and Ms. Quandt is making about concern about shifts is an important one. The one thing that I have a little bit of a problem with is that we are really talking about two separate shifts and two separate kinds of shifts that could take place. One is the shift that we already see now—more people moving into the veterans health care system and General Counsel's decision to terminate payment for prescriptions could, in fact, stimulate the very thing you are talking about, and that is, more use of the existing system. So that is already a shift that has begun and may, in fact, increase and if we don't have the opportunity to give prescription services, that shift may take place in certain areas.

On the other hand, you are saying that if you give now a benefit provided once nonlegally or at least under nonjurisdiction, what you are saying is, if you give that benefit now and word passes that you can get prescriptions at the VA free, that that particular system will blossom. Is that the shift?

You are more nervous about that shift than you are the shift of people who were getting free prescriptions now moving to the VA to get both free prescriptions and free health care.

Dr. CUSTIS. We agree with everything you have said, Mr. Chairman.

Mr. EDGAR. I just wanted to understand what we are doing.

Do you have any estimate in terms of tracking what that shift might mean from past experience? Are you saying that the $6.4 million or $7 million is a drop in the bucket to what it might, in fact, accrue to over time?

Dr. CUSTIS. Yes, sir, I think that's true. It could grow dramatically.

Mr. EDGAR. When you receive the information from the General Counsel's office, did you, as the director, say, "Boy, that's a good idea?" What was your reaction?

Dr. CUSTIS. I react that way to everything John Murphy has to say. [Laughter.]

Mr. MURPHY. I am going to abstain from comment.

Mr. EDGAR. I mean, you didn't send it back to Mr. Murphy and say, "Hey, why don't you take a second look at this and really see whether or not there is another way to handle it?"

Dr. CUSTIS. I think Congress sent it back to him before I had a chance to.

Mr. MURPHY. That's basically correct, Mr. Chairman. This information was originally given to DM&S in a white paper format.

There was a screaming and jumping around in various quarters outside the agency and we subsequently reviewed that paper and developed a more formal opinion.

Mr. EDGAR. It was the screaming and jumping around that made you turn it into a formal decision?

Mr. MURPHY. No; it was some rather snide and totally unjustified comments about the fact that we gave DM&S a white paper. It was almost by some people's insistence that it be a formal opinion.

Mr. EDGAR. Mr. Murphy, while you are talking there, is there authority in section 4107(g) that is not contained in H.R. 4792?

Mr. MURPHY. Could I look at that and provide it for the record? I really couldn't answer it just sitting here, Mr. Chairman. I haven't done that comparison. I'll get it to you quickly.

Mr. EDGAR. If you could provide that for the record, that would be helpful.

[Subsequently, the Veterans' Administration furnished the following information:]

DIFFERENCES BETWEEN SECTION 4107(g) AND 218(d)(1) AS PROVIDED IN H.R. 4792

The special pay rate authority of section 4107(g) differs from the provisions of section 218(d)(1) as proposed in H.R. 4792 in several ways. First the authority under 4107(g) could be implemented fairly quickly with minimal resources. Policy and procedures for administering the authority, as well as technical staff experienced in its administration, are already in place in VA. These procedures could easily and quickly be adapted for police officers and a staff would be available to process the necessary actions.

In contrast, H.R. 4792 contemplates development of a classification standard which would entail lengthy fact finding, information analysis, composition, and validation. This would require considerable resources. The development of the pay administration system also contemplated in the bill separate from the title 5 system would be similarly lengthy and costly. Our current staffing problems would go unsolved during the extended start-up period.

A second difference is that section 4107(g) addresses specific problems, when and where they exist, without requiring costly and unnecessary changes to the entire system. But the classification and pay system contemplated under proposed section 218(d)(1) in the bill would be applicable to VA police Agency-wide. Although we are experiencing serious problems with recruitment and retention at a number of stations, the present classification system and pay rates under title 5 authorities are meeting our needs at the majority of VA facilities. A new system wide program for both classification and pay as appears to be contemplated in the bill would be unwarranted and expensive.

Another aspect of our proposal to address police officer recruitment and retention problems through section 4107(g) in that its implementing mechanism is proven. Use of the authority to provide special rates has already been highly successful in resolving recruitment and retention problems we experienced with registered nurses in specific locations.

Moreover, incorporation security personnel into the section 4107(g) program would provide uniformity. Reclassifying and regarding one category of DM&S title 5 personnel, as proposed, as proposed in H.R. 4792, would establish a bad precedent. Further, creating special classification authority with regard to one category of personnel, as the bill would do, is likely to create morale problems with personnel in other hard-to-recruit categories for whom the Administrator cannot prescribe classification and grading standards.

Finally, whereas the bill would impair the integrity of the title 5 personnel system by shifting classification authority away from OPM, enlarging section 4107(g) would more nearly preserve the title 5 system. There is precedent within the VA for paying title 5 personnel at above-schedule rates. There is no such precedent for reclassifying and regarding title 5 personnel. The bill would unnecessarily create another separate class of personnel within DM&S and further fragment VA employment authorities.

Mr. EDGAR. On December 28, 1983, an article appeared in the Washington Post stating OPM had authorized pay increases for FAA police officers who work in Washington. Would you explain OPM's authority to increase these pay rates and can you tell us how many times the VA has asked for similar action by OPM with regard to their police officers?

Mr. MURPHY. Again, I would have to provide that for the record.

Mr. EDGAR. I would appreciate it. Without objection, we will await your supplying that for the record.

[Subsequently, the Veterans' Administration provided the following information:]

PAY STATUS OF POLICE FORCE OF THE NATIONAL ZOOLOGICAL PARK AND THE FAA POLICE (DULLES AND NATIONAL AIRPORTS)

The police force at the National Zoo in Washington, D.C., comes under the supervision of the Secretary of the Smithsonian Institution. Section 5375 of title 5, United States Code, provides that the Secretary shall fix the per annum rates of basic pay of positions on that police force. The statute also establishes maximum rates for the respective grades of police officers. The maximum for a Private is not more than $19,422 (the rate for a GS-7 step 5), for a Sergeant not more than $21,513 (the rate for a GS-8 step 5) for Lieutenant not more than $23,761 (the rate for a GS-9 step 5), and for Captain not more than $26,168 (the rate for a GS-10 step 5).

FAA police are currently paid under the General Schedule. FAA police officers at Dulles and National Airports recently have been granted special rates of basic pay under the provisions of section 5303 of title 5, United States Code, by OPM. OPM approved these special rates effective January 8, 1984. Currently, the minimum rate for a GS-4 is $13,191 (the equivalent of a step 3) and for a GS-5, $14,298 (the equivalent of a step 2). Legislation has been introduced to place the FAA police under a separate pay system.

Mr. EDGAR. Could you guess?

Mr. MURPHY. My guess as to the authority would be that FAA would have gone through a process similar to what we would previously be required to do or now would be required to do rather with the whole cumulation of 1 year's comparative costs, data, and then the submission. That would be my guess.

As to the number of times that OPM may have granted FAA or other agencies, I would have to check on that.

Mr. EDGAR. In the same December 28 article, an FAA police officer states that the starting salaries for police officers at the National Zoo in Washington is $16,559. Do you know if that is correct?

Mr. FASONE. No, sir, that's incorrect. The starting salary for a police officer at the National Zoo is $19,422.

Dr. CUSTIS. That was after Ling-Ling arrived. [Laughter.]

Mr. EDGAR. I always underestimate, conservative as I am. So we are saying it's $19,000.

Mr. FASONE. Yes, sir, it's the general schedule pay scale, GS-7, step 5 for a private level, which is their standard by legislation.

Mr. EDGAR. What is the starting salary for a police officer within the VA?

Mr. FASONE. The starting salary at the GS-4 level is $12,600. If we are fortunate enough in that particular area to bring him in at the GS-5 level, it's $13,600.

Mr. EDGAR. You talked about wanting police officers, not guards. You talked about experience, wanting someone who has at least 2 years of police-type experience or the equivalent in education. I note that an ad on page B12 of yesterday's Washington Post for

Federal protective officers, GSA, only requires 2 years of general work or educational experience. Your standards are higher. I guess the bottom line question is, how do you expect to recruit experienced police officers at $12,600 starting salaries for your service when other Federal service officers are doing work that may, in fact, be of equal strain or, in some instances less strain, get starting salaries of more?

Mr. FASONE. Well, to begin with, Mr. Edgar, one must know that the General Services Administration Federal Protective Service hires people under the same OPM qualification and classification standards that we do. That qualification standard requires that no one be employed at the GS–4 level as a police officer unless he possesses 2 years of experience which has provided him with a general knowledge of law enforcement and which included authority to make arrests, make searches and seizures, et cetera.

Apparently, the General Services Administration, if they are recruiting people at that level and not requiring people at these qualifications, are simply not playing the same ball game we are playing. We choose, because we feel we must, we choose to stick strictly to the OPM qualification standards because we are not about to put a badge on a man's chest who does not have this type of experience or education and send him out to enforce Federal laws or VA regulations.

So we start at that point. We start at the point of requiring that the man meet the OPM qualification standards and, in fact, we have our own internal qualifications which further define more rigidly what we mean by those standards. What another agency does in response to their recruitment problems is, of course, not under our control.

Mr. EDGAR. If we gave the Washington Veterans Hospital as an annex to the Washington Zoo we would get better police protection.

Mr. FASONE. You better believe it.

Mr. EDGAR. It's a thought.

Senator Cranston recently wrote to the VA requesting specific information relative to recruitment and retention of VA police officers. I understand that the Senator's request prompted a survey of all VA facilities. Can you provide this committee with the information that you are furnishing to Senator Cranston?

Mr. FASONE. I haven't seen the results yet. I understand they are very fresh, but we can provide them, yes, sir.

[Subsequently, the Veterans' Administration furnished the following information:]

TELEGRAPHIC MESSAGE

CIRCULAR 10-84-12
January 30, 1984

NAME OF AGENCY	PRECEDENCE	SECURITY CLASSIFICATION
VACO, WASH DC	ACTION R INFO	
ACCOUNTING CLASSIFICATION	DATE PREPARED	FILE
	1/5/84	
FOR INFORMATION CALL		
NAME: RICHARD R. HORN	PHONE NUMBER: 2426	TYPE OF MESSAGE: ☐ SINGLE ☒ BOOK ☐ MULTIPLE ADDRESS

THIS SPACE FOR USE OF COMMUNICATION UNIT

RESTRICT TEXT OF THIS MESSAGE TO 69 CHARACTERS PER LINE

MESSAGE TO BE TRANSMITTED (Use double spacing and all capital letters)

TO: DIRECTORS, ALVAMC'S(REGIONAL DIRECTORS)

00/DM&S CIRCULAR 10-84-12 (DTD 1/30/84)

SUBJ: NONRECURRING REPORT ON SPECIAL SALARY RATE PAY AND STAFFING INFORMATION FOR POLICE OFFICERS AT VA MEDICAL FACILITIES. RCS 10-84-2

1. THE SENATE COMMITTEE ON VETERANS' AFFAIRS HAS REQUESTED INFORMATION CONCERNING POLICE OFFICER STAFFING AND SPECIAL SALARY RATES AUTHORIZED FOR THESE EMPLOYEES UNDER 5 U.S.C. 5303. IN ORDER THAT WE MAY PROVIDE THE COMMITTEE WITH APPROPRIATE DATA, PLEASE FURNISH THE FOLLOWING INFORMATION:

A. POLICE OFFICER STAFFING LEVELS. FOR ALL POLICE OFFICER POSITIONS, LIST YOUR FACILITY'S AUTHORIZED FTEE, NUMBER OF FTEE ON THE ROLLS, AND NUMBER OF VACANCIES ON EACH OF THE FOLLOWING DATES: 10/1/80, 9/30/81, 10/1/81, 9/30/82, 10/1/82, 9/30/83, 10/1/83, AND 12/31/83.

B. AVERAGE TIME REQUIRED TO FILL VACANCIES. FOR EACH OF THE FISCAL YEARS 1981, 1982, AND 1983, PROVIDE THE AVERAGE ESTIMATED LENGTH OF TIME REQUIRED TO FILL A POLICE OFFICER VACANCY AT YOUR FACILITY.

SECURITY CLASSIFICATION

PAGE NO	NO. OF PGS
1	2

STANDARD FORM 16
REVISED 11-80
GSA FPMR (41 CFR) 101-33.306

Previous editions usable NSN 7540-00-634-3966

16-102

CIRCULAR 10-84-12
January 30, 1984

TELEGRAPHIC MESSAGE

NAME OF AGENCY	PRECEDENCE ACTION INFO	SECURITY CLASSIFICATION
ACCOUNTING CLASSIFICATION	DATE PREPARED	FILE
FOR INFORMATION CALL		
NAME	PHONE NUMBER	TYPE OF MESSAGE ☐ SINGLE ☐ BOOK ☐ MULTIPLE ADDRESS

FOR USE FOR USE OF COMMUNICATIONS UNIT

RESTRICT TEXT OF THIS MESSAGE TO 69 CHARACTERS PER LINE

MESSAGE TO BE TRANSMITTED (Use double spacing and all capital letters)

TO

2. SPECIAL SALARY RATE REQUESTS. SEND COPIES OF ALL SPECIAL SALARY RATE REQUESTS FOR POLICE OFFICERS THAT WERE APPROVED OR DISAPPROVED FOR YOUR FACILITY BY THE OFFICE OF PERSONNEL MANAGEMENT SINCE OCTOBER 1, 1980. INCLUDE COPIES OF ANY ADDITIONAL CORRESPONDENCE WITH OPM PERTAINING TO THE REQUESTS.

3. INQUIRIES. QUESTIONS CONCERNING THIS CIRCULAR MAY BE DIRECTED TO THE WAGE SURVEY AND SPECIAL RATES DIVISION (052A) ON FTS 389-2426 OR 2642.

4. REPORT IDENTIFIED BY RCS 10-84-2 WILL BE TRANSMITTED NO LATER THAN 2/9/84 BY TELETYPE FOR PARAGRAPHS 1(A) AND 1(B) AND BY MAIL FOR PARAGRAPH 2, ADDRESSED TO VACO (052A). NEGATIVE REPORTS ARE REQUIRED. THIS CIRCULAR EXPIRES ON FEBRUARY 29, 1984. 052A/10A

J. F. Heaney
1/30/84

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2	2	

STANDARD FORM 10
REVISED 11-8-
GSA FPMR (41 CFR) 101-35.306

Previous editions obsolete NSN 7540-00-634-3966

14-103

MAR 14 1984

Honorable Alan Cranston
Ranking Minority Member
Committee on Veterans' Affairs
United States Senate
Washington, D. C. 20510

Dear Senator Cranston:

I am pleased to send the enclosed historical information you asked for in your letter of December 5, 1983, regarding police officer staffing and special salary rates. If I can be of further assistance, please let me know.

Sincerely,

Deputy Administrator • FOR

HARRY W. WALTERS
Administrator

SIGNED AND DATED ATTACHED
MAR 1 / 1984
ADMINISTRATOR'S OFFICE

Enclosures 2

cc: 02
10
60
05
Reading File - 052A

RECEIVED
MAR 8 1984
ADMINISTRATOR'S OFFICE

RRHORN:iac 3-2-84 052A 052 05B 05A 05 RETURN TO 052

REGION 1 - Police Officer Staffing

	STATION	10-1-80 Auth	10-1-80 On Rolls	10-1-80 Vac	9-30-81 Auth	9-30-81 On Rolls	9-30-81 Vac	10-1-81 Auth	10-1-81 On Rolls	10-1-81 Vac	9-30-82 Auth	9-30-82 On Rolls	9-30-82 Vac	10-1-82 Auth	10-1-82 On Rolls	10-1-82 Vac	9-30-83 Auth	9-30-83 On Rolls	9-30-83 Vac	10-1-83 Auth	10-1-83 On Rolls	10-1-83 Vac	12-31-83 Auth	12-31-83 On Rolls	12-31-83 Vac
CT	Newington MC	7	6	1	8	6	2	8	6	2	8	7	1	8	7	1	7	7	0	7	7	0	7	7	0
CT	West Haven MC	11.8	10.8	1	11.8	10.8	1	11.8	11.8	0	12.8	12.8	0	12.8	12.8	0	13.8	12	2	13.8	12.8	1	13.5	12	2
MA	Bedford MC	11	10	1	11	8	3	11	8	3	11	11	0	11	11	0	11	11	0	11	10	1	11	9	2
MA	Boston MC	17	17	0	17	17	0	17	17	0	26	17	9	26	17	9	29	20	9	29	21	8	29	19	10
MA	Brockton MC	21	21	0	21	18	3	23	19	4	22	19	3	22	19	3	21.2	18	3.2	21.2	18	3.2	27	21	6
MA	Northampton MC	8	8	0	8	8	0	8	8	0	8	8	0	8	8	0	8	8	0	8	8	0	8	8	0
ME	Togus M&ROC	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0
NH	Manchester MC	5	5	0	5	5	0	5	5	0	5	4	1	6	4	2	6	6	0	6	6	0	6	6	0
NY	Albany MC	14	12	2	14	11	3	14	11	3	14	13	1	14	13	1	14	14	0	14	14	0	14	14	0
NY	Batavia MC	6	6	0	6.5	6.5	0	6.5	6.5	0	6.5	6.5	0	6.5	6.5	0	6.5	6.5	0	6.5	6.5	0	6.5	7	0
NY	Bath MC	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
NY	Bronx MC	28	26	2	28	28	0	28	28	0	39	33	6	39	33	6	39	39	0	39	39	0	39	37	2
NY	Brooklyn MC	35	35	0	35	30	5	35	33	2	36	36	0	36	36	0	36	34	2	36	34	2	36	34	2
NY	Buffalo MC	14	14	0	14	14	0	14	14	0	17	17	0	17	17	0	17	17	0	17	17	0	17	16	1
NY	Canandaigua MC	9	8	1	12	12	0	12	12	0	12	12	0	12	12	0	12	10	2	12	10	2	12	12	0
NY	Castle Point MC	6	6	0	6	6	0	6	6	0	6	6	0	7	6	1	7	7	0	7	6	1	7	6	1
NY	Montrose MC	13	12	1	13	12	1	13	12	1	13	13	0	13	13	0	15	12	3	15	13	2	15	13	2
NY	New York MC	29	29	0	29	24	5	29	24	5	31	21	10	31	24	7	31	27	4	31	27	4	31	27	4
NY	Northport MC	13	10	3	13	9	4	13	9	4	15	10	5	15	10	5	21	15	6	21	15	6	21	16	5
NY	Syracuse MC	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0
PR	San Juan M&ROC	28	28	0	28	28	0	28	28	0	28	28	0	28	28	0	28	28	0	27	27	0	27	27	0
RI	Providence MC	12	12	0	13	13	0	13	12	1	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0
VT	White Rvr Junc M&ROC	5	5	0	5	5	0	5	5	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
MA	Boston OPC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

MC - Medical Center
M&ROC - Medical & Regional Office Center
DOM - Domiciliary
OPC - Outpatient Clinic

REGION I - Police Officer Staffing, Page 2

	STATION	AVERAGE TIME IN DAYS TO FILL VACANT POSITIONS FY 1981	FY 1982	FY 1983
CT	Newington MC	120	150	150
CT	West Haven MC	90	90	120
MA	Bedford MC	35	70	35
MA	Boston MC	0	75	45
MA	Brockton MC	30	35	40
MA	Northampton MC	0	74	54
ME	Togus M&ROC	35	35	0
NH	Manchester MC	42	47	17
NY	Albany MC	120	60	30
NY	Batavia MC	39	37	64
NY	Bath MC	0	0	0
NY	Bronx MC	90	90	100
NY	Brooklyn MC	21	21	21
NY	Buffalo MC	0	35	0
NY	Canandaigua MC	29	64	41
NY	Castle Point MC	30	30	90
NY	Montrose MC	90	90	95
NY	New York MC	NA	138	108
NY	Northport MC	150	180	180
NY	Syracuse MC	50	30	10
PR	San Juan M&ROC	30	30	30
RI	Providence MC	30	30	30
VT	White River Junc M&ROC	35	35	35
MA	Boston OPC	NA	NA	NA

REGION II - Police Officer Staffing

STATION	10-1-80 Auth	10-1-80 On Rolls	10-1-80 Vac	9-30-81 Auth	9-30-81 On Rolls	9-30-81 Vac	10-1-81 Auth	10-1-81 on Rolls	10-1-81 Vac	9-30-82 Auth	9-30-82 On Rolls	9-30-82 Vac	10-1-82 Auth	10-1-82 On Rolls	10-1-82 Vac	9-30-83 Auth	9-30-83 On Rolls	9-30-83 Vac	10-1-83 Auth	10-1-83 On RoRls	10-1-83 Vac	12-31-83 Auth	12-31-83 On Rolls	12-31-83 Vac
DC Washington MC	24	21	3	25	21	4	25	21	4	25	21	4	25	21	4	25	21	4	25	20	5	25	22	3
DE Wilmington M&ROC	9	7	2	7	9	0	7	9	0	9	9	0	9	8	1	9	8	1	9	8	1	9	9	0
MD Baltimore MC	11	11	0	11	11	0	11	11	0	14	11	3	14	11	3	14	12	2	14	11	3	14	12	2
MD Ft. Howard MO	11	11	0	11	11	0	11	11	0	10	8	2	10	9	1	9	8	1	9	8	1	9	8	1
MD Perry Point MC	8	7	1	9	9	0	9	9	0	9	8	1	9	8	1	9	8	1	9	8	1	9	9	0
NC Asheville MC	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0
NC Durham MC	10	9	1	10	8	2	10	8	2	10	9	1	10	9	1	10	9	1	10	9	1	10	8	2
NC Fayetteville MC	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0
NC Salisbury MC	10	9	1	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0
NJ East Orange MC	15	11	4	18	12	6	18	12	6	21	17	4	21	17	4	24	21	3	26	23	3	30	24	6
NY Lyons MC	14	14	0	14	12	2	14	12	2	14	12	2	14	12	2	14	13	1	14	13	1	14	13	1
PA Altoona MC	3	3	0	4	4	0	4	4	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
PA Butler MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
PA Coatesville MC	13	13	0	13	13	0	13	13	0	13	13	0	13	13	0	13	12	1	13	12	1	13	13	0
PA Erie MC	4	4	0	4	4	0	4	4	0	6	6	0	6	6	0	6	5	1	6	5	1	6	5	1
PA Lebanon MC	10	9	1	9	9	0	9	9	0	10	9	1	10	9	1	10	10	0	10	10	0	10	10	0
PA Philadelphia MC	21	18	3	21	15	6	21	16	5	21	20	1	24	22	2	25	19	6	23	18	5	23	22	1
PA Pittsburgh (HD) MC	10	8	2	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0
PA Pittsburgh (UD) MC	19	18	1	19	19	0	19	19	0	19	18	1	19	17	2	19	17	2	19	19	0	19	18	1
PA Wilkes-Barre MC	10	8	2	11	11	0	11	11	0	11	11	0	11	11	0	11	10	1	11	10	1	11	12	0
TN Mountain Home MC	13	13	0	14	14	0	14	14	0	14	14	0	14	14	0	13	14	0	13	14	0	13	13	0
VA Hampton MC	12	12	0	12	12	0	12	12	0	12	12	0	12	12	0	12	11	1	12	11	1	12	11	1
VA Richmond MC	15	14	1	15	12	3	15	12	3	18	14	4	18	14	4	23	23	0	23	23	0	26	26	0
VA Salem MC	9	9	0	9	8	1	9	8	1	9	10	0	9	10	0	10	10	0	10	10	0	10	9	1
WV Beckley MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
WV Clarksburg MC	6	6	0	6	6	0	6	6	0	5	5	0	5	5	0	5	6	0	5	6	0	5	6	0
WV Huntington MC	5	5	0	6	6	0	6	6	0	6	6	0	6	6	0	7	7	0	6	6	0	6	6	0
WV Martinsburg MC	4	4	0	6	5	1	6	5	1	9	9	0	9	9	0	8	7	1	8	7	1	8	8	0

REGION II - Police Officer Staffing, Page 2

	STATION	AVERAGE TIME IN DAYS TO FILL VACANT POSITIONS FY 1981	FY 1982	FY 1983
DC	Washington MC	60	90	120
DE	Wilmington M&ROC	60	60	60
MD	Baltimore MC	30	45	90
MD	Ft. Howard MC	60	60	30
MD	Perry Point MC	35	35	35
NC	Asheville MC	0	0	0
NC	Durham MC	59	59	58.75
NC	Fayetteville MC	0	0	0
NC	Salisbury MC	30	30	30
NJ	East Orange MC	40	90	90
NY	Lyons MC	60	60	210
PA	Altoona MC	35	35	35
PA	Butler MC	30	30	30
PA	Coatesville MC	0	0	75
PA	Erie MC	0	90	60
PA	Lebanon MC	120	120	0
PA	Philadelphia MC	90	90	180
PA	Pittsburgh (HD) MC	21	21	21
PA	Pittsburgh (UD) MC	0	40	41
PA	Wilkes-Barre MC	30	30	60
TN	Mountain Home MC	73	0	0
VA	Hampton MC	30	30	30
VA	Richmond MC	60	35	30
VA	Salem MC	60	60	0
WV	Beckley MC	21	0	0
WV	Clarksburg MC	0	0	90
WV	Huntington MC	30	0	30
WV	Martinsburg MC	30	120	30

REGION III - Police Officer Staffing

	STATION	10-1-80 Auth	10-1-80 On Rolls	10-1-80 Vac	9-30-81 Auth	9-30-81 On Rolls	9-30-81 Vac	10-1-81 Auth	10-1-81 On Rolls	10-1-81 Vac	9-30-82 Auth	9-30-82 On Rolls	9-30-82 Vac	10-1-82 Auth	10-1-82 On Rolls	10-1-82 Vac	9-30-83 Auth	9-30-83 On Rolls	9-30-83 Vac	10-1-83 Auth	10-1-83 On Rolls	10-1-83 Vac	12-31-83 Auth	12-31-83 On Rolls	12-31-83 Vac
AL	Birmingham MC	6	6	0	6	6	0	6	6	0	8	8	0	8	8	0	8	8	0	8	8	0	8	8	0
AL	Montgomery MC	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	6	1	7	7	0
AL	Tuscaloosa MC	9	9	0	9	10	0	9	10	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0
AL	Tuskegee MC	12	12	0	12	13	0	12	13	0	14	14	0	14	14	0	15	13	2	15	13	2	15	15	0
AR	Fayetteville MC	6	6	0	6	6	0	6	6	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0
AR	Little Rock MC	26	26	0	26	26	0	26	26	0	26	26	0	26	26	0	28	26	2	32	26	6	32	29	3
FL	Bay Pines MC	11	11	0	13	13	0	13	13	0	15	14	1	15	14	1	15	15	0	15	15	0	15	15	0
FL	Gainesville MC	11	11	0	11	11	0	11	11	0	13	12	1	11	12	0	13	13	0	13	12	1	13	14	0
FL	Lake City MC	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
FL	Miami MC	20	18	2	20	18	2	20	18	2	22	22	0	22	22	0	24	20	4	24	20	4	24	20	4
FL	Tampa MC	11	11	0	12	12	0	12	12	0	14	14	0	14	14	0	14	14	0	14	14	0	14	14	0
GA	Atl (Decatur) MC	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0	10	10	0
GA	Augusta MC	26	26	0	26	24	2	26	25	1	29	28	1	29	28	1	29	28	1	29	28	1	27	26	1
GA	Dublin MC	8	8	0	8	8	0	8	8	0	8	8	1	8	8	1	8	9	0	9	9	0	9	9	0
KY	Lexington MC	21	21	0	21	21	0	21	21	0	21	20	1	21	20	1	21	21	0	21	21	0	21	21	0
KY	Louisville MC	8	7	1	8	7	1	8	7	1	8	8	0	8	8	0	8	7	1	8	7	1	8	8	0
LA	Alexandria MC	6	6	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
LA	New Orleans MC	15	14	1	15	12	3	15	12	3	25	24	1	25	24	1	25	25	0	25	25	0	25	24	1
LA	Shreveport MC	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0
MS	Biloxi MC	19	19	0	19	15	4	19	15	4	19	17	2	19	17	2	19	18	1	19	18	1	19	19	0
MS	Jackson M&ROC	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	8	1
SC	Charleston MC	12	11	1	11	11	0	11	11	0	11	11	0	11	11	0	10	10	0	10	10	0	10	10	0
SC	Columbia MC	12	12	0	12	12	0	12	12	0	13	13	0	13	13	0	13	13	0	13	13	0	13	13	0
TN	Memphis MC	19.5	18	1.5	19.5	18	1.5	19.5	18	1.5	21.5	19	2.5	21.5	19	2.5	21	21	0	23	21	2	23	22	1
TN	Murfreesboro MC	8	8	0	9	9	0	9	9	0	9	9	0	9	9	0	10	10	0	10	10	0	10	10	0
TN	Nashville MC	12	12	0	12	11	1	12	12	0	12	12	0	12	12	0	12	12	0	12	12	0	12	12	0

REGION III - Police Officer Staffing, Page 2

	STATION	AVERAGE TIME IN DAYS TO FILL VACANT POSITIONS FY 1981	FY 1982	FY 1983
AL	Birmingham MC	0	55	0
AL	Montgomery MC	0	0	40
AL	Tuscaloosa MC	35.4	35.4	35.4
AL	Tuskegee MC	0	0	30
AR	Fayetteville MC	60	60	60
AR	Little Rock MC	42	56	33
FL	Bay Pines MC	14	14	14
FL	Gainesville MC	14	83	153
FL	Lake City MC	0	120	33
FL	Miami MC	30	90	30
FL	Tampa MC	120	33	71
GA	Atl (Decatur) MC	0	0	0
GA	Augusta MC	35	35	35
GA	Dublin MC	180	60	50
KY	Lexington MC	35	30	30
KY	Louisville MC	90	90	90
LA	Alexandria MC	63	0	0
LA	New Orleans MC	100	90	35
LA	Shreveport MC	21	21	21
MS	Biloxi MC	150	135	87
MS	Jackson M&ROC	0	0	0
SC	Charleston MC	30	0	30
SC	Columbia MC	30	30	30
TN	Memphis MC	67	122	104
TN	Murfreesboro MC	21	21	21
TN	Nashville MC	15	31	28

REGION IV - Police Officer Staffing

	STATION	10-1-80 Auth	10-1-80 On Rolls	10-1-80 Vac	9-30-81 Auth	9-30-81 On Rolls	9-30-81 Vac	10-1-81 Auth	10-1-81 On Rolls	10-1-81 Vac	9-30-82 Auth	9-30-82 On Rolls	9-30-82 Vac	10-1-82 Auth	10-1-82 On Rolls	10-1-82 Vac	9-30-83 Auth	9-30-83 On Rolls	9-30-83 Vac	10-1-83 Auth	10-1-83 On Rolls	10-1-83 Vac	12-31-83 Auth	12-31-83 On Rolls	12-31-83 Vac
IL	Chicago (LS) MC	19	18	1	19	17	2	19	17	2	19	18	1	19	18	1	19	19	0	19	19	0	19	18	1
IL	Chicago (WS) MC	21	20	1	21	22	0	20	22	0	20	20	0	20	20	0	20	17	3	20	18	2	20	19	1
IL	Danville MC	12	12	0	12	11	1	12	12	0	12	11	1	12	11	1	12	11	1	12	11	1	12	11	1
IL	Hines MC	39	36	3	39	36	3	39	39	0	39	36	3	39	36	3	39	36	3	39	36	3	39	38	1
IL	Marion MC	5	5	0	5	5	0	5	5	0	5	6	0	5	6	0	5	6	0	5	6	0	5	6	0
IL	North Chicago MC	24	21	3	24	23	1	24	23	1	24	23	1	24	23	1	24	23	1	24	23	1	24	23	1
IN	Ft. Wayne MC	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
IN	Indianapolis	15	15	0	15.8	14	1.8	15.8	15.8	0	16	17	0	16	17	0	16	16	0	16	16	0	16	15	1
IN	Marion MC	12	12	0	12	13	0	12	13	0	12	12	0	12	12	0	12	14	0	12	14	0	12	14	0
MI	Allen Park MC	18	18	0	18	18	0	18	18	0	20	20	0	20	20	0	19	19	0	19	19	0	20	20	0
MI	Ann Arbor MC	8	8	0	8	7	1	8	7	1	8	8	0	8	8	0	8	8	0	8	8	0	8	8	0
MI	Battle Creek MC	12	12	0	13	11	2	13	11	2	12	12	0	12	12	0	12	11	1	12	11	1	12	12	0
MI	Iron Mountain MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
MI	Saginaw MC	5	5	0	5	3	2	5	3	2	5	4	1	5	4	1	5	5	0	5	5	0	5	5	0
MO	Columbia MC	8	8	0	8	8	0	8	8	0	8	7	1	8	6	2	8	7	1	8	7	1	8	7	1
MO	Poplar Bluff MC	6	6	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0	6	5	1	6	6	0
MO	St. Louis MC	26	25	1	26	26	0	26	26	0	26	26	0	26	26	0	25	23	2	25	23	2	25	23	2
OH	Chillicothe MC	13	12	1	13	12	1	13	12	1	13	12	1	13	12	1	13	13	0	13	13	0	13	13	0
OH	Cincinnati MC	17	15	2	17	17	0	17	17	0	17	16	1	17	16	1	17	17	0	17	17	0	17	17	0
OH	Cleveland MC	44	44	0	49	48	1	49	47	2	52	44	8	45	39	6	45	41	4	45	39	6	45	38	7
OH	Dayton MC	24	24	0	24	24	0	24	24	0	24	25	0	24	25	0	26	23.5	2.5	26	23.5	2.5	26	24.5	1.5
WI	Madison MC	6	6	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
WI	Tomah MC	6	6	0	7	7	0	7	7	0	7	7	0	7	7	0	7	6	1	7	6	1	7	7	0
WI	Wood MC	24	22	2	23	23	0	23	23	0	23	22	1	23	22	1	23	22	1	23	22	1	25	25	0

REGION IV - Police Officer Staffing, Page 2

STATION	AVERAGE TIME IN DAYS TO FILL VACANT POSITIONS FY 1981	FY 1982	FY 1983
IL Chicago (LS) MC	60	60	60
IL Chicago (WS) MC	39	0	128
IL Danville MC	300	90	90
IL Hines MC	50	59	52
IL Marion MC	0	12	0
IL North Chicago MC	50	60	60
IN Ft. Wayne MC	0	0	60
IN Indianapolis	32	18	16
IN Marion MC	180	0	0
MI Allen Park MC	0	91	32.6
MI Ann Arbor MC	90	120	40
MI Battle Creek MC	45	0	47
MI Iron Mountain MC	7	10	17
MI Saginaw MC	30	30	30
MO Columbia MC	0	120	120
MO Poplar Bluff MC	60	60	30
MO St. Louis MC	40	40	40
OH Chillicothe MC	87	121	84
OH Cincinnati MC	105	120	105
OH Cleveland MC	180	180	180
OH Dayton MC	90	90	90
WI Madison MC	21	21	21
WI Tomah MC	25	55	49
WI Wood MC	15	14	77

REGION V - Police Officer Staffing

	STATION	10-1-80 Auth	10-1-80 On Rolls	10-1-80 Vac	9-30-81 Auth	9-30-81 On Rolls	9-30-81 Vac	10-1-81 Auth	10-1-81 On Rolls	10-1-81 Vac	9-30-82 Auth	9-30-82 On Rolls	9-30-82 Vac	10-1-82 Auth	10-1-82 On Rolls	10-1-82 Vac	9-30-83 Auth	9-30-83 On Rolls	9-30-83 Vac	10-1-83 Auth	10-1-83 On Rolls	10-1-83 Vac	12-31-83 Auth	12-31-83 On Rolls	12-31-83 Vac
CO	Denver MC	10	10	0	10	10	0	10	10	0	12	12	0	12	12	0	13	11	2	13	11	2	13	11	2
CO	Ft. Lyon MC	6	5	1	6	6	0	6	6	0	6	5	1	6	5	1	7	7	0	7	7	0	7	7	0
CO	Grand Junc MC	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
KS	Leavenworth MC	15	15	0	15	15	0	15	15	0	15	15	0	15	15	0	15	15	0	15	15	0	[illegible]	15	0
KS	Topeka MC	12	12	0	12	12	0	12	12	0	12	12	0	12	12	0	12	12	0	12	12	0	[illegible]	12	0
KS	Wichita M&ROC	7	5	2	7	6	1	7	6	1	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0
LA	Des Moines MC	10	9	1	9.8	9.8	0	9.8	9.8	0	9.8	9.8	0	9.8	9.8	0	9.8	9.8	0	9.8	9.8	0	9.8	10	0
LA	Iowa City MC	7	7	0	7	7	0	7	7	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0
LA	Knoxville MC	7	7	0	9	9	0	9	9	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0
MN	Minneapolis MC	10	9	1	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0
MN	St. Cloud MC	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0	11	11	0
MO	Kansas City MC	13	13	0	14	14	0	14	14	0	14	14	0	14	14	0	15	15	0	15	15	0	15	16	0
MT	Ft. Harrison M&ROC	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
MT	Miles City MC	5	5	0	5	5	0	5	5	0	5	4	1	5	4	1	5	5	0	5	5	0	5	5	0
ND	Fargo M&ROC	5	4	1	5	5	0	5	5	0	5	5	0	5	4	1	5	5	0	5	5	0	5	5	0
NE	Grand Island MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	4	1	5	4	1	5	4	1
NE	Lincoln MC	6	6	0	5	4	1	5	4	1	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
NE	Omaha MC	9	7	2	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0
OK	Muskogee MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	6	6	0	6	6	0	6	6	0
OK	Oklahoma City MC	14	14	0	14	12	2	14	12	2	14	14	0	14	14	0	14	13	1	14	13	1	14	14	0
SD	Ft. Meade MC	5	5	0	5	5	0	5	5	0	5	6	0	6	6	0	6	6	0	6	6	0	6	6	0
SD	Hot Springs MC	9	9	0	9	7	2	9	7	2	9	7	2	9	7	2	8	6	2	8	6	2	7	5	2
SD	Sioux Falls M&ROC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
TX	Bonham MC	5	5	0	6	6	0	6	6	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0
TX	Dallas MC	15	14	1	15	12	3	15	12	3	17	15	2	17	15	2	18	18	0	18	18	0	19	18	1
TX	Houston MC	22	21	1	21	19	2	21	19	2	24	23	1	24	23	1	24	21	3	24	21	3	24	21	3
TX	Kerrville MC	6	6	0	6	5	1	6	5	1	6	5	1	6	5	1	6	5	1	6	5	1	6	5	1
TX	Marlin MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
TX	San Antonio MC	17	17	0	17	17	0	17	17	0	19	17	2	19	17	2	19	20	0	19	19	0	19	20	0
TX	Temple MC	12	11	1	12	11	1	13	16.5	0	15	16.5	0	18	17.5	.5	17.4	18	0	17.4	18	0	17.4	17.5	0
TX	Waco MC	12	11	1	14	13	1	14	13	1	14	14	0	14	14	0	16	16	0	16	16	0	16	15	1
UT	Salt Lake City MC	8	8	0	8	8	0	8	8	0	8	5	3	8	5	3	8	8	0	8	8	0	8	8	0
WY	Cheyenne M&ROC	6.8	6.8	0	6.8	6.8	0	6.8	6.8	0	6.8	6.8	0	6.8	6.8	0	7	7	0	7	7	0	7	6	1
WY	Sheridan MC	5	5	0	6	5	1	6	5	1	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0

REGION V - Police Officer Staffing, Page 2

	STATION	AVERAGE TIME IN DAYS TO FILL VACANT POSITIONS FY 1981	FY 1982	FY 1983
CO	Denver MC	40	40	40
CO	Ft. Lyon MC	49	67	41
CO	Grand Junc MC	30	0	45
KS	Leavenworth MC	0	0	0
KS	Topeka MC	56	0	43
KS	Wichita M&ROC	115	90	85
IA	Des Moines MC	35	35	0
IA	Iowa City MC	120	90	120
IA	Knoxville MC	60	60	30
MN	Minneapolis MC	54.5	69.6	84
MN	St. Cloud MC	7	83	93
MO	Kansas City MC	18	11	29
MT	Ft. Harrison M&ROC	81	50	19
MT	Miles City MC	32	10	52
ND	Fargo M&ROC	0	60	30
NE	Grand Island MC	0	0	150
NE	Lincoln MC	28	66	0
NE	Omaha MC	65	60	60
OK	Muskogee MC	0	60	30
OK	Oklahoma City MC	45	40	70
SD	Ft. Meade MC	32	25	0
SD	Hot Springs MC	0	30	0
SD	Sioux Falls M&ROC	0	40	0
TX	Bonham MC	21	21	21
TX	Dallas MC	90	60	40
TX	Houston MC	40	40	40
TX	Kerrville MC	111	180	40
TX	Marlin MC	30	0	30
TX	San Antonio MC	36	41	18
TX	Temple MC	21	21	21
TX	Waco MC	26	57	76
UT	Salt Lake City MC	0	90	0
WY	Cheyenne M&ROC	0	0	120
WY	Sheridan MC	45	30	0

REGION VI - Police Officer Staffing

	STATION	10-1-80 Auth	10-1-80 On Rolls	10-1-80 Vac	9-30-81 Auth	9-30-81 On Rolls	9-30-81 Vac	10-1-81 Auth	10-1-81 On Rolls	10-1-81 Vac	9-30-82 Auth	9-30-82 On Rolls	9-30-82 Vac	10-1-82 Auth	10-1-82 On Rolls	10-1-82 Vac	9-30-83 Auth	9-30-83 On Rolls	9-30-83 Vac	10-1-83 Auth	10-1-83 On Rolls	10-1-83 Vac	12-31-83 Auth	12-31-83 On Rolls	12-31-83 Vac
AZ	Phoenix MC	13.5	13.5	0	13.5	13.5	0	13.5	13.5	0	13.5	13.5	0	13.5	13.5	0	13.5	13.5	0	13.5	13.5	0	13.5	13.5	0
AZ	Prescott MC	6	6	0	6	5	1	6	5	1	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
AZ	Tuscon MC	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	9	0	9	8	1
CA	Fresno MC	8	7	1	8	8	0	8	8	0	8	8	0	8	8	0	8	7	1	8	7	1	8	8	0
CA	Livermore MC	5	5	0	5	5	0	5	5	0	7	6	1	7	6	1	7	7	0	7	7	0	7	6	1
CA	Loma Linda MC	11	11	0	14	12	2	14	12	2	14	15	0	14	15	0	14	12	2	14	12	2	14	14	0
CA	Long Beach MC	24	18	6	24	19	5	24	19	5	23	19	4	24	21	3	24	20	4	24	22	2	25	21	4
CA	Martinez MC	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0	7	7	0
CA	Palo Alto MC	15	12	3	15	14	1	15	14	1	17	13	4	17	13	4	17	14	3	17	14	3	17	14	3
CA	San Diego MC	13	13	0	13	12	1	13	12	1	13	12	1	13	12	1	13	12	1	13	12	1	12.5	12	.5
CA	San Francisco MC	13	13	0	12	12	0	12	12	0	12	10	2	12	10	2	11	11	0	12	11	1	12	12	0
CA	Sepulveda MC	14	14	0	14	13	1	14	13	1	14	11	3	14	11	3	14	11	3	14	11	3	14	11	3
CA	West Los Angeles MC	40	34	6	40	33	7	40	33	7	45	43	2	45	43	2	45	42	3	45	42	3	45	45	0
ID	Boise MC	5	5	0	5	4	1	5	4	1	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
NV	Reno MC	8	8	0	8	8	0	8	8	0	8	7	1	8	7	1	8	8	0	8	8	0	8	8	0
NM	Albuquerque MC	10	9	1	10	9	1	10	9	1	10	9	1	10	9	1	10	10	0	10	10	0	10	10	0
OR	Portland MC	12	12	0	13	13	0	13	13	0	14	12	2	14	12	2	15	14	1	15	14	1	15	16	0
OR	Roseburg MC	7	7	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0	6	6	0
OR	White City DOM	8	7	1	9	9	0	9	9	0	9	8	1	9	8	1	9	9	0	9	9	0	9	9	0
TX	Amarillo MC	5	5	0	5	4	1	5	4	1	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
TX	Big Spring MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	4	1	5	4	1	5	4	1
WA	American Lk (Tacoma) MC	6	2	4	6	7	0	6	7	0	6	6	0	6	5	1	6	6	0	6	6	0	7	6	1
WA	Seattle MC	6	6	0	9	8	1	9	8	1	9	8	1	9	8	1	9	8	1	9	8	1	9	9	0
WA	Spokane MC	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0	5	5	0
WA	Walla Walla MC	5	5	0	5.8	5.8	0	5.8	5.8	0	5.8	5.8	0	5.8	5.8	0	6	6	0	6	6	0	6	6	0
CA	Los Angeles OPC	6	6	0	6	6	0	6	5	1	6	5	1	6	5	1	6	5	1	6	5	1	6	4	2

REGION VI - Police Officer Staffing, Page 2

STATION		AVERAGE TIME IN DAYS TO FILL VACANT POSITIONS FY 1981	FY 1982	FY 1983
AZ	Phoenix MC	30	30	14
AZ	Prescott MC	0	0	0
AZ	Tuscon MC	0	60	0
CA	Fresno MC	85	NA	111
CA	Livermore MC	0	40	65
CA	Loma Linda MC	19	20.5	18
CA	Long Beach MC	60	90	90
CA	Martinez MC	45	0	30
CA	Palo Alto MC	59.85	61.3	60.11
CA	San Diego MC	66	70	126
CA	San Francisco MC	70	55	60
CA	Sepulveda MC	60	90	90
CA	West Los Angeles MC	60	180	30
ID	Boise MC	7	12	15
NV	Reno MC	0	60	0
NM	Albuquerque MC	40	180	10
OR	Portland MC	30	77	40
OR	Roseburg MC	0	0	0
OR	White City DOM	56	60	61
TX	Amarillo MC	240	15	75
TX	Big Spring MC	68	38	49
WA	American Lk (Tacoma) MC	30	60	90
WA	Seattle MC	90	60	90
WA	Spokane MC	0	0	0
WA	Walla Walla MC	21	21	21
CA	Los Angeles OPC	0	60	60

Mr. EDGAR. Let me, before I release the panel, we have some people from around the country who have come in who represent——

Mr. FASONE. They are our regional security officers.

Mr. EDGAR. I would like to give any one or all of them an opportunity for 1 or 2 minutes at the microphone, if they have anything that they can add to the question of recruitment and retention of qualified police officers within the system.

Mr. FASONE. If Mr. Furr could come forth on that question, because Mr. Furr is also not only a regional security officer, but also the chief of our police training facility at North Little Rock.

Mr. FURR. Mr. Chairman and members of the committee, I have nothing further to add to the comments already made other than to express my appreciation for the opportunity to appear before the committee and hope that a favorable action to address our problems, as we have identified them, will be forthcoming.

Mr. EDGAR. Thank you.

Have any of the other three regional people who are here have any comments that they would like to make?

[No response.]

Mr. EDGAR. Let me ask then one final question for the record. When the Milwaukee hospital lost its authority did it also lose its money?

Mr. FASONE. No, sir, those officers that were recruited during the period when special rates were in effect retain that in perpetuity. This, of course, brings around another morale problem. As new officers come in at lower pay, we then have to live with a continuous, nagging morale problem. This is the same problem that plagues FAA at the airport. There is such a mixture over there of their 100 officers; some on special pay from the last special pay go-around before that was cut off. There are some officers over there who joined over there the past 2 or 3 years without special pay and now the new influx of officers coming in with special pay. That adds to their problems.

Mr. PRICE. Mr. Edgar, if I might add one comment to what Mr. Fasone is saying. In VA's dealing with OPM on special rate requests, the Office of Personnel Management is of the opinion that there must be a significant recruitment retention problem in place; that is, demonstrate through a specific number of vacancies that the VA has a serious problem.

My opinion on utilization of the special rate authority is that when we see a problem coming we utilize the special rate authority to avert it. We should not have to be in a situation of having safety or morale problems because of significant shortages in staff.

Mr. EDGAR. Before you leave, let me just commend you for your efforts. We spent some time visiting the Nation's veterans hospitals and discovered an awful lot of general enthusiasm and support within the staff, even given some of the pressures of morale. I think that you are to be commended and the other police officers who work within the system, given the restraints that we have, for providing the service. I would only hope that you could share your information about the nonlethal weapons that you use with other branches of the Federal Government. I think that we have far too many handguns being carried around by police officers, many of

whom are not well trained in the handling and use of that and I think there are other ways to prevent serious crime and serious injury. I think you have demonstrated that over the last 11 years. I am pleased that we are not going on a major effort to arm ourselves. I think some of the security procedures around the Capitol give the impression that we are moving to a police state as opposed to a free democratic nation. I think that you are to be commended for being able to handle the level of serious problems that you face with the lower amounts of salary and we will see if we can't do something about giving you some recruitment and retention opportunities.

Mr. FASONE. Mr. Chairman, on behalf of all of our police officers, I certainly appreciate this opportunity. I would like to point out that we do have a fine body of officers out there and it makes us sad that our resigning police officers leave us with the same comment, that they really would like to stay with us, but they simply can't afford it.

Mr. EDGAR. Thank you.

I want to commend the panel for their eagerness. That was very creative. We may have additional questions for the record for the panelists. Dr. Custis, wherever he is, may get them in the mail.

Dr. Paul Schafer, the executive director of the National Association of VA Physicians, is next.

Dr. Schafer, thank you for your patience this morning. We are going to move much more quickly. We have lost our audience up here as well as you can tell. The full text of your statement will be made a part of the record.[1]

It was important for us to ask those questions of the previous witnesses and we look forward to hearing your statement.

STATEMENT OF PAUL W. SCHAFER, M.D., EXECUTIVE DIRECTOR, NATIONAL ASSOCIATION OF VA PHYSICIANS

Dr. SCHAFER. Thank you, Mr. Chairman. As you know, I appear here in a strictly unofficial capacity with respect to the agency. However, I do speak on behalf of the National Association of VA Physicians [NAVAP] as its executive director.

We welcome this opportunity to present these remarks to you and I feel sorry that on H.R. 4792, which has occupied so much of the testimony here this morning that my preliminary survey of our officers and of our membership does not allow me to speak with a clear voice on this substantial proposal to create a special Veterans Administration police force within title 38. This matter has been placed on the agenda of the next monthly meeting of our board of directors and of our district directors this next Friday and Saturday. I would respectfully request that we be allowed the opportunity to submit to you in writing the result of that pair of meetings.

Mr. EDGAR. Without objection, you may submit that in writing.[2] We need a timely turnaround on that.

Dr. SCHAFER. You will have it on Monday next.

Mr. EDGAR. Thank you very much.

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[1] The prepared statement of Dr. Paul Schafer appears on p. 133.
[2] See p. 134.

Dr. SCHAFER. Now in respect to H.R. 4625, it's my understanding that this bill provides a needed 15-day grace period for the Comptroller General to file a report concerning the Director of the Office of Management and Budget's compliance with his requirement to provide the Veterans' Administration its funded personnel ceiling.

We obviously support the careful monitoring of this administration official's action since he has now publicly targeted the veterans medical program as one of his prime areas for budget cutting during the effort to reduce the staggering Federal deficit.

H.R. 3876 provides statutory authority for center pharmacy services who, obviously, do what many of them have been doing for years; namely, providing of drugs and medicines to service-connected veterans who are not on staff or fee-basis treatment. It is my understanding, and it has since been confirmed during the testimony here today, that about 6 months ago a central office directive terminated this practice. At least at the Washington, D.C., VAMC, this resulted in a medical administrative service letter of notification to such veterans that only one more prescription would be filled without the veteran being seen by a VA outpatient physician who would then be required to rewrite the prescription if, indeed, it seemed to be indicated. I am advised that no workload no budgetary impact of this change has been noted by the pharmacy service during this period of time, but that it has clearly increased the outpatient physician and administrative workload. It is certainly suggested that service-connected veterans' needs might be better and more conveniently served by return to prior practice, such as is provided in this proposed legislation.

Lastly, in respect to H.R. 4695, this represents a basis for continuation of the now expired provisions of the Civil Service Reform Act of 1978 to provide that the Administrator may authorize an exception to existing title V restrictions that require mandatory reductions in military retirement pay of certain retired military officers, if necessary to recruit a well-qualified doctor of medicine or osteopathy for a DM&S position which otherwise cannot be readily filled.

The main thrust of this proposed legislation is such that it guarantees support by the National Association of VA Physicians. The NAVAP charter defines the organization's purpose to be the preservation and strengthening of the veterans medical program and to insure it being served by physicians of the highest caliber.

NAVAP has consistently represented that the agency has a chronic recruitment and retention problem in respect to first-class physicians. It has been shown repeatedly that VA physician's income is substantially inferior to that of physicians in the private sector, academic and otherwise. Income disparity is the largest causative factor producing this indolent cancer threatening the veterans medical program.

On December 28, 1981, former Administrator Robert P. Nimmo promulgated an order reducing VA physicians' special incentive pay by $4,982 per year. This arbitrary and capricious action was justified by the erroneous representation that the agency did not have a substantial recruitment and retention problem requiring the special incentive pay authorized by Public Law 96-330. You will recall that this law came into being by override of then Presi-

dent Carter's veto on August 26, 1980, by a vote of 401 to 5 in the House and by an historic 85 to 0 vote in the Senate, only the fourth time in the history of the Republic such a unanimous Senate override has occurred. NAVAP has tried unsuccessfully to obtain judicial relief from this irrational position in which the agency finds itself as a result of the action of this prior administrator. The Nimmo legacy is that VA physicians have to date suffered a $7,293 loss of income which continues to increase at the rate of $2,682 per year.

We respectfully represent that the agency's first-class physician recruitment and retention problem would be more meaningfully served, addressed, by immediate cancellation of the special incentive pay reduction schedule which was published on December 9, 1982.

We respectfully request that the committee advise or otherwise counsel Administrator Harry N. Walters to take this meritorious action. For the veterans medical program to provide first quality health care to sick and injured veterans no impediments should be allowed to stand in the way of the agency's efforts to staff the program with the most competent health care professionals it can obtain. How a nation honors its contract with the men and women who have served in its Armed Forces is a measure of its destiny.

I thank you very much, Mr. Chairman.

Mr. EDGAR. Thank you very much for your statement.

As I understand it, you are a full-time physician, a surgeon, as well as being the director of this association.

Dr. SCHAFER. That is correct. I am the chief of chest surgery at the Washington, D.C., Veterans' Administration Medical Center.

Mr. EDGAR. It's particularly important for us to show our appreciation to you for taking the time today to testify and put your comments together and wait your turn in testifying and giving our committee the full range of your words when at the same time you provide the service that you do for the veterans community. We want to thank you for that.

We don't have any specific questions for you at this time. We will take your recommendation, particularly on page 2, under serious consideration. We appreciate the thoroughness of your statement.

Dr. SCHAFER. Thank you, sir.

Mr. EDGAR. Our next witness at this point will be Mr. David Gorman, assistant deputy national legislative director, Disabled American Veterans.

Mr. Gorman, it is a pleasure to have you here this morning. The full text of your statement will be made a part of the record.[1] It would be very helpful if you could summarize the important, key points that you would like to make in the interest of time. I am under a time constraint of an 11:30 appointment.

STATEMENT OF DAVID W. GORMAN, ASSOCIATE DEPUTY NATIONAL LEGISLATIVE DIRECTOR, DISABLED AMERICAN VETERANS

Mr. GORMAN. Thank you, Mr. Chairman. I certainly will do that.

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[1] The prepared statement of Mr. David Gorman appears on p. 134.

With respect to H.R. 3876, that would authorize the Veterans' Administration to furnish each veteran with a service-connected, compensable disability with such drugs and medicines as may be prescribed by any licensed physician for the treatment of the service-connected disability, the DAV certainly supports this legislation.

According to a recent General Counsel opinion, only veterans receiving authorized fee-basis care or increased compensation or pension benefits based upon the VA's findings that they are permanently housebound or in need of regular aid and attendance are eligible to have prescriptions filled by the VA. The General Counsel has concluded, apparently, that there exists no legal authority that would permit the VA to fill such prescriptions for any other category of veterans.

We feel there are various factors to this issue, many have been discussed this morning, to produce various ripple effects for both the veteran and the administration. These include cost-effectiveness, an increased workload on VA personnel and a significant difficulty for veterans.

As concerns the issue of cost-effectiveness, we feel that filling prescriptions by mail or through direct veteran contact with the VA pharmacy would avoid the necessity of occupying valuable time for various VA medical facility personnel in scheduling appointments, the pulling and the routing of medical records and providing beneficiary travel pay. Additionally, there would be an increased workload placed on already overburdened VA physicians.

In a medical care system that will experience a total of nearly 17 million staff outpatient medical visits in fiscal year 1985 and will do so with only a meager increase in the number of physicians and support personnel, we find it both ironic and impractioal to require and actually to encourage a significantly large influx of additional veterans to come into the system.

Also, we know that a large number of veterans, many with seriously disabling conditions, who do not have eligibility for fee-basis care, find it difficult or sometimes impossible to receive direct VA care. Examples would be those veterans afflicted with such disabilities as amputations, chronic back disorders, or severe neurological conditions.

Mr. Chairman, for these reasons, and so long as proper medical and administrative monitoring is initiated to assure that prescriptions are appropriate in terms of the service-connected disability being treated, we conclude that this legislation is reasonable and necessary. In fact, this would be in keeping with the goal of a resolution that was approved by the delegates to our most recent national convention.

With respect to H.R. 4625, Mr. Chairman, the DAV has no official position on this proposed legislation. However, we would certainly favor its enactment into law.

H.R. 4694 would authorize the Veterans' Administration to waive in certain cases mandatory reductions in the military retired pay of certain retired military officers recruited for employment in the department of medicine and surgery. Again, the DAV has no official position on this bill. However, we do not object to its enactment as employment of such individuals could only serve to en-

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hance both the type and the quality of medical care provided to disabled veterans.

With respect to H.R. 4792, Mr. Chairman, the DAV has two initial concerns regarding the provisions as currently constructed in the bill.

First, would be the absence of language regarding an affirmative action plan for the hiring of qualified disabled veterans and to veterans of the Vietnam era. As it is the policy of the United States to promote maximum employment and job advancement opportunities within the Federal Government to qualified disabled veterans and veterans of the Vietnam era, we would suggest, should H.R. 4792 be favorably reported that this policy be made a part of the accompanying report language.

Second, that provision of the bill which would provide the VA Administrator with the authority to "authorize police officers to carry firearms while in the performance of their official duties" and "to prescribe standards for the issuance and carrying of firearms by police officers."

While we certainly have no specific objection to VA police officers carrying firearms, we are primarily concerned, as I am sure the subcommittee is, with the safety of VA employees and veterans. In this regard, it could prove catastrophic if an emotionally disturbed veteran's behavior were to be mistakenly interpreted by a VA police officer as criminal in nature as opposed to simply a manifestation of his disability requring medical treatment.

Therefore, we would urge that the subcommittee, again, should this legislation be favorably reported, to include report language specifically requiring that all VA police officers should receive specialized training and instruction in the management and the handling of veterans in the hospital environment, especially those veterans that are emotionally disturbed.

Mr. Chairman, that concludes my statement. I want to thank you for allowing us the opportunity to present our views here this morning.

Mr. EDGAR. Thank you very much. The two recommendations that you make on page 7 of your testimony will be considered by this committee, particularly your first recommendation dealing with the fair employment of disabled and Vietnam era veterans. I think that's a flaw in the legislation that we really have to take under consideration. I appreciate your raising the second point and we will look at that as well.

Mr. GORMAN. Thank you.

Mr. EDGAR. Thank you very much for your testimony.

Our next witness will be from the American Legion, Mr. Paul Egan and Mr. Bob Lyngh.

Gentleman, it's a pleasure to have you here this morning. I appreciate your patience, as always. Every time I have a hearing it seems to go longer and longer, but I appreciate your willingness to be here and to give some testimony.

The full text of your statement will be made a part of the record.[1]

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[1]The prepared statement of Mr. Egan and Mr. Lyngh appear on p. 136.

STATEMENT OF PAUL S. EGAN, DEPUTY DIRECTOR, NATIONAL LEGISLATIVE COMMISSION, THE AMERICAN LEGION AND ROBERT E. LYNGH, DIRECTOR, NATIONAL VETERANS AFFAIRS & REHABILITATION, THE AMERICAN LEGION

Mr. EGAN. First of all, as always, the longer and longer the hearings are, the more and more productive they become.

Bob Lyngh will summarize our remarks, but I would just simply say that we would echo the comments of the DAV and those that you will hear from AMVETS on the affirmative action for veterans with regard to the recruitment of security guards.

Mr. LYNGH. Mr. Chairman, before presenting an excerpt from our full statement, I would like to interpolate, based on testimony that has been presented to the subcommittee today, and point out to the subcommittee that the American Legion field service, which performs site visits in a minimum of 65 VA facilities each year, provides a special survey in each of those site visit reports of the security service in the facilities. The testimony and the information that we have acquired during the past 2 or 3 years in this regard makes very clear—and we would like the subcommittee to be assured—that the security situation in VA facilities, particularly in the high density urban areas,is a serious one and requires the attention of this subcommittee.

For several years, the American Legion has been intensely interested in the problems that continue to plague the VA security service in the form of excessive turnover rates of personnel, ongoing recruitment and retention problems and a host of other serious shortcomings that demand immediate correction.

The expectation is that hospitals will provide a reasonably safe environment. It is the opinion of the American Legion that many VA facilities are not presently accomplishing this goal and in the remainder, security is often times deficient. This subcommittee is well aware of the alarming statistics that surround the system-wide security service so we will not elaborate on these at this time.

Our field representatives consistently highlight serious problems at VA medical centers that are a direct result of inadequate stability within the security work force. Our surveys confirm our contention that the security service continues to deteriorate at an alarming rate. We contend that certain aspects of H.R. 4792, if implemented, will certainly help to solve longstanding recruitment and retention problems and will ultimately stabilize VA security operations.

As this subcommittee knows, this is long overdue. The American Legion fully supports a system-wide increase in the grades and step levels at which VA police officers may be employed. We also agree with the provision that increases the limitations on the administrative authority to affix penalties for violations of various regulations.

We do, however, feel compelled to disagree with any provision that would allow VA police officers at VAMC's to carry firearms. Our analysis of this situation shows potential ramifications that far outweigh justification at this time.

Mr. Chairman, the three other measures under consideration today are all supported either in whole or part by The American

Legion. The first of these is H.R. 3876. Since non-service-connected, housebound beneficiaries in receipt of aid and attendance allowances may receive medication from VA honoring prescriptions written by non-VA physicians, we have to view denial of the same benefit for service-connected veterans as equitable. A slight change in the legislation could be made which would both eliminate the inequity between non-service- and service-connected veterans while still allowing VA a measure of control over its drug expenditures.

H.R. 4694 would provide certain retired regular military officer physicians with an incentive to seek employment with the VA's Department of Medicine and Surgery. The provisions of the bill would provide a greater income for retired military physicians and the incentive created would undoubtedly provide VA with a useful recruitment tool.

Mr. Chairman, we thank you for your attention.

Mr. EDGAR. Thank you very much for your statement. I do have one question. You have done a great service to our committee by providing us with those site visit reports. They are very helpful to the staff. During the course of today's hearing, I have come to a revelation personally and that deals with one of the questions you raised and was raised by at least one of our previous witnesses on the use of firearms.

It seems to me that if you look at the existing law, there is already the opportunity for extraordinary use of firearms within the VA system and it probably doesn't make sense to give blanket authority for that, given the record and the history of the last 11 years. Would you concur from your site visits that that's the case, that there is no urgency that we arm these particular individuals?

Mr. LYNGH. Mr. Edgar, I would respond in the affirmative and I would like to just add to that the underlying rationale that has led to the position that we have assumed. You start with the fact that the Veterans' Administration is in the lifesaving business and we could set up for you the worst case scenario, the worst possible horror story in which a VA security officer, for whatever reason, used a firearm on a patient and, can't you just see the headline of the New York Times the next morning that the Veterans' Administration is now shooting its patients? There has to be a better way to deal with the problem, probably including more intense reliance on local police agencies.

Mr. EDGAR. I appreciate your statement and I, for one, am going to work on that legislation, at least at that level, and also at the level of affirmative action. I just want to thank you for that.

Mr. Lyngh, in your statement you made some indication that the OPM study had been suspended. Do you have information on that? I had asked earlier of the earlier panel and they didn't know.

Mr. LYNGH. We were told earlier by someone at the Veterans' Administration whose name I can't provide to you at the moment, that the study has been suspended.

Mr. EDGAR. We will check that out for the record. If you have any additional information that you can provide us, it would be very helpful.

Thank you.

Our final witness today will be the national legislative director for AMVETS, Col. David Passamaneck.

I want to congratulate you on your long statement.

Colonel PASSAMANECK. Thank you, Mr. Chairman.

Mr. EDGAR. The full text of your extended statement will be made a part of the record.[1] You can summarize as you wish.

Colonel PASSAMANECK. I trust that it set some sort of record. If not, I will try again.

STATEMENT OF LT. COL. DAVID PASSAMANECK, U.S. ARMY (RET.), NATIONAL LEGISLATIVE DIRECTOR, AMVETS

Colonel PASSAMANECK. Mr. Chairman, AMVETS appreciates the opportunity to submit its views on the proposed legislation under consideration.

We favor enactment of H.R. 3876 but would urge deletion of the words, "and compensable in degree," and, "compensable" respectively from lines 5 and 7 of the bill. There is no reason why zero rated, service-connected veterans should still be required to obtain prescriptions from VA physicians for their service-connected conditions. Now, of course, we realize that the word "compensable" may be open to some legal interpretation. However, in the light of the recent experience with VA General Counsel interpretations of words, we would prefer that the legislation be specific in that respect.

H.R. 4625 is a technical amendment which we do not oppose.

We favor the enactment of H.R. 4694 but note with dismay the continued inequity of penalizing regular retired officers in general by applying discriminating dual compensation limits when they are employed in the civil service. We realize, of course, that is beyond the jurisdiction of this committee, but we feel it would perhaps be much more preferable if we didn't have these dual compensation laws and didn't have to have exceptions to them.

We favor H.R. 4792, but would require the Administrator to certify in each case in which a non-veteran is hired that no qualified veterans could be hired from among applicants after all reasonable efforts were put forth to hire veteran law enforcement officers.

Of course, we would have no objection to weighting this preference in favor of disabled veterans or Vietnam era veterans, for that matter, if they were otherwise qualified.

That concludes my testimony, sir. Thank you very much.

Mr. EDGAR. I want to also mention that legislation we are working with you on to expand the charter of AMVETS seems to be proceeding nicely in the House and we anticipate that we can see some action on that legislation.

Colonel PASSAMANECK. We are extremely grateful for the tireless efforts that you have put forth in getting that legislation through. We appreciate it very much.

Mr. EDGAR. We hope we can see action on that shortly. Thank you for your statement.

Colonel PASSAMANECK. Thank you.

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[1] The prepared statement of Colonel Passamaneck appears on p. 138.

Mr. EDGAR. I want to thank everyone for coming this morning. The hearing stands adjourned.

[Whereupon, at 11:18 a.m., on Wednesday, March 7, 1984, the subcommittee was adjourned.]

APPENDIX

[H.R. 3876, 98th Congress, 1st session]

A BILL To amend title 38, United States Code, to authorize the Veterans' Administration to furnish each veteran with a compensable service-connected disability, such drugs and medicines as may be prescribed by any licensed physician for treatment of the service-connected disability.

Be it enacted by the Senate and House Representatives of the United States of America in Congress assembled, That subsection 612(h) is amended by adding after the word "veteran" the first time it appears the words" for a disability which is service connected and compensable in degree to each veteran" and by adding after the words "treatment of" the words "the compensable service-connected disability, or in the case of a veteran who is permanently housebound or in need of regular aid and attendance, for".

[H.R. 4625, 98th Congress, 2d session]

A BILL To amend section 5010 of title 38, United States Code, to clarify the time for submission of the Comptroller General's report required by that section

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section 5010(a)(4)(C) of title 38, United States Code, is amended to read as follows:

"(C) After the expiration of the period for a certification by the Director of the Office of Management and Budget under subparagraph (B) of this paragraph, the Comptroller General shall submit to the appropriate committees of the Congress a report stating the Comptroller General's opinion as to whether the Director of the Office of Management and Budget has complied with the requirements of that subparagraph in providing to the Veterans' Administration such funded personnel ceiling. The report shall be submitted not later than fifteen days after the end of the period specified in such subparagraph for the Director to submit the required certification.".

[H.R. 4694, 98th Congress, 2d session]

A BILL To amend title 38, United States Code, to authorize the Administrator of Veterans' Affairs to waive mandatory reductions in military retirement pay of certain retired military officers recruited for employment by the Department of Medicine and Surgery

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section 4107, title 38, United States Code, is amended by adding at the end the following new subsection:

"(i) The Administrator may authorize an exception to the restrictions in subsections (a), (b), and (c) of section 5532 of title 5 if necessary to recruit a well qualified doctor of medicine or osteopathy for a position in the Department of Medicine and Surgery which otherwise cannot readily be filled.".

[H.R. 4792, 98th Congress, 2d session]

A BILL To amend title 38, United States Code, to clarify the scope of authority of Veterans' Administration police officers, and for other purposes

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That (a) section 218 of title 38, United States Code, is amended to read as follows:

"§ 218. Security and law enforcement on property under the jurisdiction of the Veterans' Administration; appointment of police officers

"(a)(1) The Administrator may prescribe regulations to provide for the maintenance of law and order and the protection of persons and property on land and in

buildings under the jurisdiction of the Veterans' Administration and not under the control of the Administrator of General Services (hereinafter in this section referred to as 'Veterans' Administration property'). The Administrator may also prescribe by regulation penalities within the limits established in paragraph (2) of this subsection for the violation of such regulations. Such regulations (including penalties prescribed under this paragraph) shall be posted in a conspicuous place on such property.

"(2) Whoever violates any regulation issued under paragraph (1) of this subsection shall be fined or imprisoned within the limits prescribed by the Administrator. Such a fine may not exceed $500 and such a term of imprisonment may not exceed six months.

"(b)(1) The Administrator may appoint qualified persons as Veterans' Administration police officers. Such police officers shall enforce Federal laws and the regulations issued under subsection (a) of this section on Veterans' Administration property. A Veterans' Administration police officer may make arrests on Veterans' Administration property for a violation of any law of the United States or of any regulation prescribed under subsection (a) of this section.

"(2) The Administrator may authorize police officers to carry firearms while in the performance of their official duties. The Administrator shall prescribe standards for the issuance and carrying of firearms by police officers.

"(c) With the permission of the head of the agency concerned, the Administrator may use the facilities and services of Federal law enforcement agencies and of State or local law enforcement agencies when it is economical and in the public interest to do so.

"(d)(1) Notwithstanding any other provision of law, the Administrator shall issue standards for placing Veterans' Administration police officers in their proper classes and grades and may increase the rates of basic pay otherwise authorized under applicable laws and regulations for persons in such classes and grades. The standards shall define the duties and responsibilities assignable to such police officers, establish class titles, and set the grades in which the classes have been placed. Veterans' Administration police officers shall be regarded as competitive service employees and shall be entitled to all the rights and privileges and shall be subject to all other laws applicable to these employees. In issuing the standards under this paragraph, the Administrator may consider geographic differences and other factors which affect the ability to recruit and retain persons as police officers.

"(2) The Administrator shall appoint a chief inspector to supervise Veterans' Administration police officers. The chief inspector shall receive compensation at a rate determined by the Administrator, but not to exceed the highest rate of basic pay payable to a person in grade GS-15 of the General Schedule established by section 5332 of title 5.

"(e)(1) The Administrator shall select and regulate the pattern for a uniform for Veterans' Administration police officers.

"(2) The Administrator shall furnish each police officer authorized to carry firearms or other weapons with the necessary weapons and belts.

"(3)(A) The Administrator may reimburse police officers for purchases of uniform clothing. Except as provided in this paragraph, the total reimbursement paid to an officer may not exceed $175 in any calendar year.

"(B) The Administrator may reimburse a police officer for purchases of uniform clothing in an amount up to $400 in lieu of the annual amount authorized in subparagraph (A) of this paragraph. A police officer may not submit a claim for reimbursement under this subparagraph more than once. A police officer who resigns as a police officer less than one year after submitting a claim for reimbursement under this subparagraph shall repay to the Veterans' Administration a pro rata share of the amount paid, based on the number of months the police officer was actually employed during the calendar year for which the reimbursement was made.

"(f) Except in a case in which the Administrator determines that advance notice is not feasible because of emergent circumstances, any modification or change to the rules and regulations prescribed under subsection (a) of this section or the standards issued under subsection (b) or (d) of this section may not take effect until ninety days after the date on which the Administrator submits a copy of the modification or change to the Committees on Veterans' Affairs of the Senate and House of Representatives.".

(b) The item relating to such section in the table of sections at the beginning of chapter 3 of such title is amended to read as follows:

"218. Security and law enforcement on property under the jurisdiction of the Veterans' Administration; appointment of police officers.".

SEC. 2. (a) Not later than ninety days after the date of the enactment of this Act, the Administrator shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the implementation of section 218 of title 38, United States Code, as amended by the first section of this Act. The report shall contain (1) the rules and regulations prescribed under subsection (a) of that section and (2) the standards issued under subsections (b) and (d) of that section. In addition, the Administrator shall submit with the report a list of the facilities where it is proposed to appoint Veterans' Administration police officers and of the number and salary of police officers proposed to be appointed at each such facility.

(b) A person may not be appointed as a Veterans' Administration police officer or paid a salary established pursuant to subsection (d) of that section until ninety days have elapsed from the date on which the Administrator submits the report and lists described in subsection (a).

STATEMENT OF DONALD L. CUSTIS, M.D., CHIEF MEDICAL DIRECTOR, DEPARTMENT OF MEDICINE AND SURGERY, VETERANS' ADMINISTRATION

Mr. Chairman and members of the subcommittee, I appreciate the opportunity to appear before the Subcommittee this morning to offer our views on four bills pending before the Subcommittee: H.R. 3876, H.R. 4694, H.R. 4792, and H.R. 4625.

VA PROVISION OF DRUGS PRESCRIBED BY NON-VA PHYSICIANS—H.R. 3876

Mr. Chairman, section 612(h) of title 38, United States Code, currently authorizes the VA to provide drugs and medicines prescribed by private non-VA physicians to veterans who are receiving increased compensation or pension because they are permanently housebound or in need of regular aid and attendance. Except for provisions of law authorizing the VA to furnish certain veterans fee-basis care, section 612(h) is the only authority for the VA to fill prescriptions written by non-VA physicians. H.R. 3876 would expand section 612(h) to authorize VA to provide such privately prescribed drugs and medicines to veterans for treatment of compensably rated service-connected disabilities. We oppose enactment of H.R. 3876.

Mr. Chairman, VA is mandated by law to provide eligible veterans with all needed medical services, either in VA-operated facilities or, where necessary, in facilities the VA contracts for. Section 612(h), as currently written, provides an exception to this VA role by authorizing our medical centers to provide pharmacy services to a veteran even though the individual is not under VA's care. The exception was created by Congress nearly twenty years ago to respond to the unique needs of veterans who were housebound or in need of aid and attendance. Those veterans who were so sick or disabled that, in many cases, they were unable to come to a VA medical facility for care. Section 612(h) predated the enactment of legislation permitting VA to provide those veterans with outpatient care on a fee basis. Such veterans had been unable to avail themselves of VA-sponsored care, and had had to rely on more conveniently located private physicians. The enactment of section 612(h) authorized VA to provide those veterans who were housebound or in need of aid and attendance the service of filling prescriptions written by their private physicians.

The need for section 612(h) was largely eliminated when Congress authorized VA to provide fee-basis care for all nonservice-connected veterans who are permanently housebound or in need of regular aid and attendance. In light of the longstanding nature of the benefit authorized by section 612(h), and the relatively small number of veterans affected, we do not seek the repeal of that provision. However, we would strongly counsel against expanding it further. It is important to note that all veterans who would benefit from enactment of H.R. 3876 are now eligible to receive care for those disabilities in either VA facilities or, if necessary, under VA-approved fee arrangements.

Mr. Chairman, we at the VA attempt to provide veterans, particularly service-connected veterans, with a complete hospital and medical service. H.R. 3876 would encourage some veterans who do not choose to avail themselves of VA medical care, to use the VA solely as a pharmacy. If VA is required to fill privately written prescriptions for all veterans for compensably rated service-connected disabilities, it might encourage an unnecessary and unwarranted expansion to also provide those veterans with other services ordered by private physicians, such as X-rays, laboratory studies and other diagnostic tests. Establishing a VA role as a mere provider of ancillary medical services would be a fundamental and unwarranted departure from

the longstanding, congressionally mandated principle that VA should provide eligible veterans with all necessary care and treatment.

Finally, Mr. Chairman, if H.R. 3876 is enacted, it will be necessary for VA to verify that prescriptions submitted to VA for filling are actually written for treatment of service-connected disabilities. This will complicate administration of the pharmacy program and will require greater resources than are now necessary.

WAIVER OF MANDATORY REDUCTIONS OF MILITARY RETIREMENT PAY FOR VA PHYSICIANS—H.R. 4694

H.R. 4694 would give VA authority to grant waivers to the mandatory reductions in retired or retainer pay of certain retired military officers recruited by the VA as doctors of medicine or osteopathy. The new authority would be somewhat broader but similar to delegated authority that expired in January 1984. VA would support enactment of this bill only if it were amended to restrict the granting of waivers to doctors who are (1) specialists in scarce specialities, (2) needed for high-level management positions in DM&S, or (3) employed at facilities with unusual recruitment problems.

Currently, the retired and retainer pay of most retired military officers recruited to work for the VA is subject to reduction pursuant to the requirements of section 5532(b)–(c) of title 5, United States Code. Section 5532 requires the retired or retainer pay of a retired regular officer who holds a paid Government position to be reduced to an annual rate equal to the first $6,775.72 (if age 62 or older as of March 1, 1983) or $6,736 (if under age 62 as of March 1, 1983) of that pay, plus one-half of the remainder, if any. It also imposes an overall ceiling on such pay for appointees, currently in the amount of $66,000. These mandatory reductions attaching to Federal employment make employment in the private sector, where no reduction in retired or retainer pay occurs, much more attractive and impair VA's ability to recruit necessary physicians in selected specialties or geographic locations.

During the five-year period prior to its expiration on January 11, 1984, the authority in section 5532(e) of title 5 permitted the Office of Personnel Management (OPM) to grant exceptions to the retired or retainer pay reductions. In July 1980, OPM delegated this authority to the VA with respect to Department of Medicine and Surgery medical officers. Until the expiration of the authority in January 1984, the VA granted exceptions for twenty-six appointments to key positions involving crucial mission requirements. Under these delegations, exceptions were only approved when the appointee was in a scarce medical specialty, was being considered for a senior management position, or when there was a severe recruitment/retention problem in filling a particular position.

The bill would give VA its own new authority to waive the retired or retainer pay reductions, to fill a position in the Department of Medicine and Surgery "which cannot otherwise readily be filled." We do not believe that the language included in H.R. 4694 is precise enough and therefore strongly recommend that the bill be amended to include explicitly the three circumstances for granting waivers I enumerated earlier. At the same time, I can assure th Subcommittee it would be used as prudently as was the waiver authority we had received from OPM. Overall, the bill would go far to ensure our continuing ability to employ the especially highly qualified physicians, particularly in scarce and shortage category specialties, that VA needs to meet our healthy care mission.

ENHANCEMENT OF THE VA SECURITY SERVICE—H.R. 4792

H.R. 4792 proposes to amend section 218 of title 38 to clarify VA's security operations on land and in buildings under the jurisdiction of the VA and not under the control of the Administrator of General Services. Although we agree with the intent of this bill, the issues raised in H.R. 4792 are extremely important to the conduct of the Government law enforcement efforts in general and must be coordinated on Government-wide basis.

Penalty changes

The bill would increase the maximum penalty for violating VA law enforcement regulations. The maximum fine would go from $50 to $500 and the maximum jail sentence from 30 days to six months. The change would allow the Federal courts to make the punishment more appropriately fit the crime and would bring VA penalties into line with the limits for petty offenses as defined in title 18, as well as those currently available under the law enforcement regulations of other agencies.

More importantly, the change would increase the likelihood of these cases being prosecuted and would make these petty offense regulations a more effective deter-

rent. The current limits of $50 and 30 days are so in substantial that they lack deterrent effect and tend not to justify the effort and cost in resources that are involved in prosecuting them.

Clarify enforcement authority

A second obstacle to effectively deterring criminal conduct has been the question raised about whether section 218, as currently worded, gives VA police officers enforcement and arrest authority with respect to misdemenaors and petty offenses such as enforcement of current regulations. By recasting section 218, the bill would clarify the authority of VA police officers to enforce laws and regulations and to make arrests. This would be in addition to VA's current felony enforcement authority. We favor this provision as a way of removing any doubt and further enhancing the deterrent effect of the statue and regulations.

Proposed section 218(b)(2) of title 38 provides for the issuance of standards concerning the issuance of and carrying of firearms. The Administration believes that the issuance of firearms, the training of employees as police officers and the conduct of the Government law enforcement effort in general is an important issue which must be coordinated throughout the Federal Government. We recommend therefore that this section be amended to provide that the Administrator of the VA, with the concurrence of the Attorney General, issue regulations concerning the training of police officers, the use of firearms and other matters connected with such activities.

Unnecessary authorities

The bill would make statutory several authorities which VA currently exercises by regulation and policy. For example, it would require the Administrator to appoint a GS-15 Chief Inspector to supervise VA police officers. A position of Director of Security Service, grade GS-15, whose duties include supervision of VA police officers, is already authorized within DM&S. We do not need to provide for this position by legislation and oppose this provision.

The bill would also require the Administrator to select and regulate the pattern for VA police officer uniforms and to furnish each police officer authorized to carry firearms or other weapons with the necessary weapons and belts. Both of these requirements are currently provided for as matter of published VA policy. There is no need to legislate these requirements and we oppose these provisions.

Recruiting/retention

For some years, one of VA's major concerns has been to improve recruitment and retention of highly qualified personnel to serve as VA police officers. The VA has long had difficulties with such recruitment and retention, especially in certain geographic areas. Current authorities have proven inadequate to deal with many of the problem areas.

One source of recruiting/retention problems is the low morale and financial hardship resulting from the fact that required uniforms cost much more than the authorized uniform allowance provides. Currently, VA police officers are allowed a flat $125 annually. Under subsection 218(e)(3), as proposed, they would be authorized a one-time uniform purchase allowance of up to $400 and an annual uniform purchase allowance of $175 thereafter. We strongly support this measure. It would help rectify the unfair financial hardship currently faced by VA police officers. In our view, no one should have to suffer a financial disadvantage in order to work as a VA police officer, and the uniform allowance provisions would help prevent that.

The principal problem in the recruitment and retention of highly qualified personnel is our inability to pay competitive rates, particularly in certain geographic areas. This is evidenced by relatively high officer turnover in areas where competitive pay rates are generally higher we are able to pay. The bill proposes to resolve this problem by requiring the Administrator to issue standards for classifying and grading VA police officers and authorizing the Administrator to increase rates of basic pay authorized for persons in such grades and classes. We do not believe it is necessary or appropriate to remove VA police officers from the title 5 grading and classification system. The problem is money and although it is a widespread problem, it is not universal. To be of benefit, reclassifying and regrading would require that all police officers be upgraded to higher pay grades. However, that would mean providing increased rates across the board, including in areas where there is no recruitment and retention problems. OPM is currently engaged in a study of the police occupation, in order to develop revised qualification and classification standards. OPM is working closely with the VA and other agencies in carrying out the study.

Pending the completion of the OPM study we already have the basis for an interim, more flexible remedy than the bill would provide to deal with the pay disadvantage that exists in certain markets—a capability to target special pay rates where they would do the most good in recruiting and keeping quality law enforcement personnel. This could be accomplished by amending section 4107(g) which already provides a flexible targeted system for recruiting and retaining title 5 healthcare personnel to encompass VA police officers. We believe the amendment should be limited to a 3-year period.

TECHNICAL AMENDMENT REGARDING A GAO REPORTING REQUIREMENT—H.R. 4625

Mr. Chairman, H.R. 4625 makes a technical amendment to 38 U.S.C. § 5010. The amendment will correct an inconsistency between 38 U.S.C. § 5010(a)(4) (B) and (C) regarding the date by which the GAO must submit a report to the appropriate committees of the Congress. Enactment of the bill would have no impact upon the VA and we defer to the views of the GAO on the bill.

Mr. Chairman, this concludes my statement. I will be pleased to answer any questions you or members of the Subcommittee may have.

STATEMENT OF JAMES G. FASONE, DEPARTMENT OF MEDICINE AND SURGERY, VETERANS' ADMINISTRATION

Mr. Chairman and members of the committee, I appreciate this opportunity to testify before the committee regarding the Department of Medicine and Surgery's Security and Law Enforcement Program.

Before I begin, I would like to reiterate what Dr. Custis said, namely, the entire issue of training police officers, using firearms, and the conduct of the Government law enforcement efforts in general is an important issue which must be coordinated throughout the Federal Government.

Our medical centers in many areas of the country continue to experience a high degree of difficulty in the recruitment and retention of well qualified police officers.

We have a total of 1,975 police officer positions at 172 medical centers. From fiscal year 1979 to the present, over 3,100 officers have joined and then left the security service. This turbulance causes undeniably lowered efficiency, wasted training, periods of vulnerability, and additional administrative costs.

Although there are many reasons why employees leave their jobs, it is our view that a major factor has been the difficulty we have had in centers located in areas in competition with private and governmental police agencies in surrounding communities for officers able to meet our standards of performance. Entry level salaries for untrained police and deputy sheriff recruits offered by 142 nationwide agencies which serve communities having populations of under 10,000 persons provide a clear insight in to our compensation problem. The average annual wage offered to untrained recruits by these small communities is $14,368.[1] In contrast, the VA is normally limited to an entry level of $12,367 in recruiting police officers with two years prior police experience or substitute education at the college level.

Title 5 of the United States Code provides the recourse for this problem. Under this law, when we encounter recruitment or retention problems at a facility and when the problems are a result of non-competitive salaries, we can ask the Office of Personnel and Management (OPM) to let us pay higher pay rates than the regular General Schedule provides. In reviewing these requests, OMP requires us to submit a considerable amount of data on the extent of our problems and the competion we are trying to meet. We have had some difficulties in meeting the law's criteria as interpreted by OPM.

A medical center director may suffer a high police turnover problem and the week to week problems of staff shortages, overtime costs and the inexperience of newly hired police officers for quite some time. After exhausting the means available to recruit and retain police without sacrificing performance standards, the Director may then direct his Personnel Officer to initiate the several surveys and the internal data collection necessary to submit a title 5 special pay request. These external wage comparison surveys and internal data collection requirements must be based on one year's experience to constitute a complete submission. When a facility has not done this before, it can be quite time consuming. Under current procedures, once this required information has been submitted to OPM, it takes four to eight

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[1] "A Survey of 1983 Salaries and Working Conditions of the Policy Departments in the United States" Fraternal Order of Police, 32nd Edition, March 15, 1983.

months to get approval or disapproval. Special salary rates were granted for our police officer positions at our Medical Centers in New York City, Northport, New York, Chicago, Dallas and Palo Alto, California. However, because of the lack of success and the effort involved in processing such requests, we have not submitted a special salary request for VA police officers since April, 1983.

In the specific case of our New York City area Medical centers, the salary increases granted in June 1983, were lower than those requested by the VA and are not expected to improve recruitment and retention appreciably. Special salary rates are subject to annual review and OPM renewal. When special salary rates for our medical center in Milwaukee were granted in 1980, a thirty percent annual turnover rate was reduced to five percent. In 1983, the special salary rates were withdrawn by OPM due to the medical center's inability to demonstrate a continued retention problem and because a lengthy list of applicants for police officer positions existed on the OPM area office register.

Mr. Chairman, we are keenly aware of the necessity to provide a highly effective umbrella of security over our patients, employees and property. We are also certain that the desired protection can be achieved through highly qualified and well trained security personnel. The handling of security and law enforcement at our medical centers is unique. To be fully effective, it requires that we have the means of recruiting and retaining well-qualified individuals who can serve as police officers in VA's medical environment.

Our incident rates in the areas of both personal and property crime remain unsatisfactorily high; much higher than the published incidence of crimes, offenses and law enforcement actions experienced by the several self-protection forces of other Federal agencies. A sampling of our Fiscal Year 1983 offense reports shows 17,579 thefts and robberies, nine rapes and twelve attempted rapes. Our police responded to 40,078 disturbances and 4,108 assaults requiring 79 uses of the non-lethal weapon carried by VA Police. Our police also confiscated 3,935 weapons, made 12,968 stops of suspicious persons, and 3,682 arrests. Over 170,000 offenders were issued violation notices and another 48,341 citations into U.S. District Courts across the nation. Our total loss of accountable government and personal property alone exceeded five million dollars.

The vulnerabilities to criminal actions at medical centers greatly exceed those of typical Federal properties such as office buildings and parks. Illustrations of these peculiar vulnerabilities are as follows. A Veterans Administration medical center contains a repository for the bulk storage of a minimum 90-day supply of over 125 drugs of potential abuse. In addition, a VA medical center typically contains two pharmacy facilities and between twenty and one hundred nursing stations containing two-day supplies of narcotics. The VA medical center, as a repository of drugs of potential abuse, has become a unique target for the obtainment of drugs through burglary, robbery, conspiratorial thefts and pilferage.

All VA medical centers operate from one to three silver recovery units with a total annual recovery of $2.5 million in bullion and $1 million in scrap X-ray film sales to outside silver recovery plants. The approximate 350 silver recovery units in daily operation and stores of used X-ray films at each center constitute an additional high target to both external and internal crime elements. In addition to this precious metal attraction, each medical center maintains a supply of gold alloy with our Central Dental Laboratories storing as much as one-quarter million dollars in gold.

The value of both medical and administrative equipment as well as general medical and administrative supplies at medical centers is inestimable. Costly portable equipment such as ADP equipment, electronic microscopes, and televison sets exist in high quantities and are constant targets for theft.

Each VA Medical Center operates several cash handling facilities for the disbursement of travel funds to patients, canteen retail store transactions, and credit union activities. The case on hand at each of these facilities exceeds five figures on regular days and is substantially higher on pay days.

From the property standpoint, opportunities for the commission of serious crimes at all VA medical centers is deemed to be exceptionally high in comparison to commercial businesses within a community and other typical Federal properties. Added to the extreme vulnerability of VA medical centers as targets for property crimes is their vulnerability for crimes against persons, our paramount concern. Both staff and patients at medical centers are extremely helpless and vulnerable targets to trespassers and deranged persons. The potential hostility of those seeking medical care is indicated by the over 40,000 disturbances and 4,000 assaults yearly in our medical centers.

These outbursts can and do occur at VA medical centers regardless of their location in urban, suburban or rural areas and must be deterred or handled by all VA Police Officers.

Mr. Chairman, as the immediate program manager responsible for VA security operations, I welcome the intent of H.R. 4792. Thank you for the opportunity to testify. I will be glad to answer any questions.

Written Committee Questions and Their Response

chairman edgar to veteran's administration

Question 1. Current regulations or policy concerning the conditions under which VA police officers may carry firearms.

Answer. Current policy of the Department of Medicine and Surgery prohibits the use, issuance or storage of firearms or any weapon other than the approved, standard chemical irritant projector (mace) for security and law enforcement purposes unless specifically authorized by the Chief Medical Director, or Administrator, as appropriate. No pre-set conditions under VA police officers may carry firearms are prescribed by regulation or policy. Attachment A is extracted pages from the DM&S policy manual which address weapon policy and procedures (paragraph 15).

Attachment B is a copy of special authorization by the Administrator for special investigators empowered under section 218 to bear firearms and the specific rules controlling their use.

[Excerpt from DM&S Supplement, MP-1, Part I, Change 39, October 31, 1982]

15. Firearms and Weapons

a. Definitions. Directors will be guided by the following definitions of terms in the adjudication of matters pertaining to the presence and use of weapons at VA facilities.

(1) Weapon. A hand held instrument specifically manufactured to supplement a person's physical capabilities in defensive or offensive combat.

(2) Dangerous Weapon. In addition to recognized weapons, any item which although not specifically manufactured as a weapon is readily adaptable for use as a weapon and, if used as such, enables the user to inflict serious or lethal injury on another.

(3) Arming. The equipping of a person with a weapon.

(4) Firearm. A weapon from which a solid shot, paper wadding or pellet lead is discharged by gunpowder.

(5) Gun. A weapon or dangerous weapon from which any solid projectile may be expelled by spring action, compressed gas or any expellant means other than gunpowder.

(6) Nightstick. Any of the commercially marketed clubs for police use including those made of wood and encased in leather, those weighted with metal and other called batons and containing tear gas dispenser compartments.

(7) CIP. Any of the commercially marketed aerosol type chemical canisters commonly referred to as Mace, which are button actuated and project a liquid stream of the irritant CN (alphachloroacetophenone), CS (tear gas) or cayenne pepper for the purpose of temporary incapacitation through acute local tissue irritation to skin and eyes. A CIP is classified as a weapon.

b. Official Use of Weapons:

(1) Following qualification, training and DM&S certification by the Director, Security [Service (132)], VA Police Officers will be armed with a DM&S approved chemical CN irritant projector. Chemical CS, cayenne pepper or CN projectors other than the DM&S approved weapon will not be used. Other hospital personnel designated by the Director may be trained and certified to use the CIP weapon.

(2) Firearms, nightsticks, or any weapon other than the approved standard DM&S CIP will not be used, issued, or stored for security or law enforcement purposes [unless specifically authorized by the Chief Medical Director, or Administrator, as appropriate.]

(3) Directors will not authorize the issue of CIP weapons to employees not trained and certified by DM&S by issuance of VA Form 10-1396.

(4) The CIP weapon approved for procurement and issue is designed to be holstered and worn externally. A CIP weapon will not be pocketed or otherwise concealed by a certified user.

(5) CIP weapons will not be removed from facility grounds by off-duty police personnel. Directors will establish regulations for turn-in and issue of weapons at watch changes.

c. Official and Privately Owned [Firearms]:

(1) With the exception of [Security Service] personnel and other employees [specifically Authorized by the Chief Medical Director or Administrator] to be armed for official purposes and members of law enforcement agencies of municipal, county, State and Federal Governments on official visits to the facility, no persons on or entering VA premises will be permitted to [ ] possess firearms. [ ] Any item classifiable as a potentially dangerous weapon for which a reasonable purpose for possession cannot be established is similarly prohibited.

(2) Directors are not authorized to bar armed law enforcement officers on official business from entering patient care areas even when the introduction of a weapon into the area is considered hazardous. However, in this situation the hazards should be discussed with the officers and an arrangement sought whereby the patient is escorted from the ward by medical personnel and VA Police Officers if appropriate.

(3) Privately owned firearms, guns, weapons and dangerous weapons will be surrendered to the facility Director or a designated representative for safekeeping, unloaded, and placed in storage under two locked barrier control for return to the patient or visitor on discharge or departure. Two locked barrier control requires as a minimum that weapons be stored in a locked container within a locked room.

(4) To the maximum extent practicable, a patient seeking admission and possessing a firearm should be requested to dispose of it prior to admission in lieu of surrendering the weapon. When the patient cannot remove the weapon from VA property or transfer it to an accompanying member of his or her family, the patient should be rquested to contact a family member or guardian and request that individual to take possession of the firearm from the VA as soon as possible.

(5) Firearms discovered or confiscated on facility grounds will be preserved and stored as evidence when appropriate or turned over to the Supply Service for disposition in accordance with Federal Property Mangement Regulations. A receipt for the firearm will be obtained and provided the owner of the firearm, if known.

d. Special Security—Dangerous Weapons [and Contraband]:

(1) Directors will assure that procedures for the inspection of personal property and inventory of valuables of patients at the time of admission (M–1, pt. VII, ch. 9) include a thorough search of personal belongings for guns and other dangerous weapons. In addition, all hospital and domiciliary patients and members will be informed of the prohibition against the introduction of guns and dangerous weapons at the time of admission and [required] to dispose of or surrender these items.

(2) Patients admitted directly to wards or admitted after normal business hours will be required to allow an inspection of all belongings and a pat down of clothing to assure the absence of any items classifiable as a dangerous weapon, alcohol or drugs.

(3) Immediate action to locate a concealed weapon (a protective search) will be initiated at first report of an uttered threat to shoot, kill or harm another and reason exists to believe that the threatening person may possess a weapon (see par. 13h for compelling exigency search authority). A threatening patient or employee will be frisked and any furnishing or property under his or her control searched for weapons.

e. Tactical Procedures—CIP Weapon:

(1) A CIP weapon will not be drawn and used against an individual holding a firearm. When an individual so armed is confronted, the safety of persons in the vicinity is of paramount importance. The police officer will placate the holder of the gun and as soon as the situation permits, direct all persons to clear the area. It is then the police officer's task to reason with the individual until the Director or other official arrives at the scene. If the objective of the individual holding a firearm is robbery, the disadvantaged police officer should remain with the robber, note his or her description as accurately as possible, diminish the possibility of the robber discharging the weapon and expedite his or her departure from the center.

(2) When all other efforts by medical and nursing personnel have failed to calm a disturbed person who is acting violently and presenting a definite danger to self or others, a minimum stream should be fired with care taken not to strike the eyes.

(3) If a disturbed person is holding a hostage whose life is clearly threatened, two police officers should position themselves to the right and left front of the disturbed person and at the command of one, both will fire 1 second streamer at the disturbed person's face and then rush to free the hostage.

(4) When employing the CIP weapon outdoors the police officers should judge the direction of any breeze or wind and position self between the direction of the wind

and the target before firing. If this is not possible due to time or if the target is faced with back to the wind, the CIP weapon should be fired from a position perpendicular to the wind direction with an aiming correction and at closer range.

f. Rules for Engagement—CIP Weapon:

(1) The primary purpose of th DM&S standard weapon is to serve as a visible deterrent to potential offenders. When used, however, the CIP weapon is very effective in terminating violent behavior and temporarily disabling an offender.

(2) The following rules for use of the CIP weapon will be adhered to by all authorized users. Directors will take disciplinary action for any infraction or unjustifiable deviation.

(a) The weapon will be used only in situations where it is absolutely required to terminate violent behavior which will clearly result in the serious injury or death of an innocent person, the violent individual, or the police officer.

(b) Projectors will not be discharged in the immediate vicinity of an infant unless the infant's life is threatened.

(c) The firing police officer will step at least 6 feet from the target person and take careful aim to assure first hit accuracy. The aiming point will be the lower part of the target's face.

(d) Firing will be limited to one successful hit and the liquid streamer discharge will not exceed the "one-one thousand" time count.

(e) Following use, the disabled victim will be assisted, handcuffed if clearly justified, and guided to a washup area immediately. Areas of the body exposed to the CN concentrate will be flushed with water repeatedly in a ventilated area. If the liquid has struck the clothing of the target persons, and they are to be detained or incarcerated, they will be showered and furnished clothing to replace the contaminated articles.

(f) Only under conditions which represent an extreme hazard (immediate threat of death or very serious injury) will the CIP weapon be discharged directly into the face at very close range (1 to 4 feet). Following weapon use in this manner, the target will be washed thoroughly and examined by a medical doctor.

[Memorandum]

VETERANS' ADMINISTRATION,
Washington, D.C., July 25, 1983.

To: Chief Medical Director.
From: Administrator.
Subject: Firearms Authorization.

(1) Pursuant to Section 218(a)(3) of Title 38, United States Code, those personnel of the Department of Medicine and Surgery named in the attached roster who have been duly appointed as law enforcement officers are authorized to bear firearms while on assignment which may require such protection.

(2) Personnel authorized to bear firearms will undergo a Federal Bureau of Investigation weapon qualification course each year to maintain proficiency.

(3) The use of firearms (deadly force) by authorized personnel will be controlled by the following rules:

(a) The discharge of a firearm is permissible only in the protection of self or others while faced with a clear and imminent threat of death or serious injury by an attacker bearing a dangerous weapon.

(b) The discharge of a firearm during the apprehension of any unarmed or fleeing misdemeanant or felon is flatly prohibited.

(c) A firearm will not be discharged when there is substantial danger to innocent bystanders or when lesser force could be used.

HARRY N. WALTERS, *Deputy Administrator.*

Attachment.

Question 2. A list of any VA medical facilities to which H.R. 4792 would not apply.

Answer. The provisions of H.R. 4792 would apply to all VA medical centers and outpatient clinics in spaces leased and controlled by the VA. Accordingly, no list if provided.

Question 3. A list of those offenses which are punishable under 38 U.S.C. Section 218, as well as existing regulations under this section.

Answer. A copy of VA Regulations issued under 38 U.S.C. 218 which lists offenses and penalties is attached.

Veterans Administration
Washington, D.C. 20420

August 22, 1973

VA REGULATIONS

GENERAL–Transmittal Sheet 122

NOTE: This material constitutes the 115th change to the General Section of VA Regulations (i.e. 1-799 and 900-999), distributed in accordance with RPC 0706.

Remove pages	Insert pages
2-19Ra and 2-19Rb	2-20Ra and 2-20Rb 2a-7Rb and 2a-7Rc 2a-7Rd and 2a-7Re 2a-7Rf and 2a-7Rg

Paragraph revised	Paragraphs added	Paragraphs canceled
6	218 219 220	None

EXPLANATION

The purpose of the following comments concerning the change included in this amendment is to inform all concerned why this change is being made. These comments are not regulatory.

VA Regulation 6. Subparagraph (A)(8) is amended to implement 38 U.S.C. 218(a)(2) and (3) (PL 93-43). It delegates to the Chief Medical Director the Administrator's authority to authorize Directors of VA facilities to appoint special policemen (hospital police) who shall act as special investigators with the power to enforce Federal laws and VA rules and regulations, and to arrest for crimes committed on VA property. That part of 38 U.S.C. 218(a)(3) authorizing appointed special policemen and special investigators to carry firearms is not implemented by this regulation.

VA Regulations 218, 219, and 220. These new regulations implement 38 U.S.C. 218(a)(1) (PL 93-43), vesting authority in the Administrator to prescribe rules and regulations for the maintaining of law and order and of protecting persons and property on lands (including cemeteries) and in buildings under the jurisdiction of the VA (and not under the control of the General Services Administration), and to annex to such rules and regulations penalties which will insure their enforcement.

By direction of the Administrator:

RICHARD L. ROUDEBUSH
Assistant Deputy Administrator

Distribution: RPC: 0706
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34-120 O - 84 - 6

[SECURITY, LAW ENFORCEMENT, AND STANDARDS OF CONDUCT ON VETERANS ADMINISTRATION PROPERTY]

[218 (§1.218). AUTHORITY, APPLICABILITY AND RESPONSIBILITY–Pursuant to 38 U.S.C. 218, the following rules and regulations apply at all property under the charge and control of the VA (and not under the charge and control of the General Services Administration) and to all persons entering in or on such property. The head of the facility is charged with the responsibility for the enforcement of these rules and regulations, and he shall cause these rules and regulations to be posted in a conspicuous place on the property.] (Aug. 22, 1973)

[(A) Closing Property to Public. The head of the facility, or his designee, shall establish visiting hours for the convenience of the public and shall establish specific hours for the transaction of business with the public. The property shall be closed to the public during other than the hours so established. In emergency situations, the property shall be closed to the public when reasonably necessary to ensure the orderly conduct of Government business. The decision to close a property during an emergency shall be made by the head of the facility or his designee. The head of the facility or his designee shall have authority to designate areas within a facility as closed to the public.] (Aug. 22, 1973)

[(B) Recording Presence. Admission to property during periods when such property is closed to the public will be limited to persons authorized by the head of the facility or his designee. Such persons may be required to sign a register and/or display identification documents when requested to do so by the hospital police, or other authorized individual. No person, without authorization, shall enter upon or remain on such property while the property is closed. Failure to leave such premises by unauthorized persons shall constitute an offense under this subparagraph.] (Aug. 22, 1973)

[(C) Preservation of Property. The improper disposal of rubbish on property; the spitting on property; the creation of any hazard on property to persons or things; the throwing of articles of any kind from a building; the climbing upon the roof or any part of the building, without permission; or the willful destruction, damage, or removal of Government property or any part thereof, without authorization, is prohibited. The destruction, mutilation, defacement, injury or removal of any monument, gravestone or other structure within the limits of any national cemetery is prohibited.] (Aug. 22, 1973)

[(D) Conformity With Signs and Emergency Directions. The head of the facility, or his designee, shall have authority to post signs of a prohibitory and directory nature. Persons, in and on property, shall comply with such signs of a prohibitory or directory nature, and during emergencies, with the direction of police authorities and other authorized officials. Tampering with, destruction, marring, or removal of such posted signs is prohibited.] (Aug. 22, 1973)

[(E) Disturbances. Conduct on property which creates loud or unusual noise; which unreasonably obstructs the usual use of entrances, foyers, lobbies, corridors, offices, elevators, stairways, or parking lots; which otherwise impedes or disrupts the performance of official duties by Government employees; which prevents one from obtaining medical or other services provided on the property in a timely manner; or the use of loud, abusive or otherwise improper language; or unwarranted loitering, sleeping, or assembly is prohibited. In addition to measures designed to secure voluntary terminations of violations of this subparagraph, the head of the facility or his designee may cause the issuance of orders for persons who are creating a disturbance to depart the property. Failure to leave the premises when so ordered constitutes a further disturbance within the meaning of this rule, and the offender is subject to arrest and removal from the premises.] (Aug. 22, 1973)

[(F) **Gambling**. Participating in games for money or other personal property, or the operating of gambling devices, the conduct of a lottery or pool, or the selling or purchasing of numbers tickets, in or on property is prohibited.] (Aug. 22, 1973)

[(G) **Alcoholic Beverages and Narcotics**. Operating a motor vehicle on property by a person under the influence of alcoholic beverages, narcotic drugs, hallucinogens, marijuana, barbiturates, or amphetamines is prohibited. Entering property under the influence of any narcotic drug, hallucinogen, marijuana, barbiturate, amphetamine or alcoholic beverage (unless prescribed by a physician) is prohibited. The use on property of any narcotic drug, hallucinogen, marijuana, barbiturate, or amphetamine (unless prescribed by a physician) is prohibited. The introduction or possession of alcoholic beverages or any narcotic drug, hallucinogen, marijuana, barbiturate, and amphetamine on property is prohibited, except for liquor or drugs prescribed for use by medical authority for medical purposes. Provided such possession is consistent with the laws of the State in which a facility is located, liquor may be used and maintained in quarters assigned to employees as their normal abode, and away from the abode with the written consent of the head of the facility which specifies a special occasion for use and limits the area and period for the authorized use.] (Aug. 22, 1973)

[(H) **Soliciting, Vending, and Debt Collection**. Soliciting alms and contributions, commercial soliciting and vending of all kinds, displaying or distributing commercial advertising, or collecting private debts in or on property is prohibited. This rule does not apply to (1) national or local drives for funds for welfare, health, or other purposes as authorized by the "Manual on Fund Raising Within the Federal Service" issued by the Civil Service Commission under Executive Order 10927 of March 18, 1961, (2) Concessions or personal notices posted by employees on authorized bulletin boards, and (3) solicitation of labor organization membership or dues under Executive Order 11491 of October 29, 1969, as amended.] (Aug. 22, 1973)

[(I) **Distribution of Handbills**. The distributing of materials such as pamphlets, handbills, and/or flyers, and the displaying of placards or posting of materials on bulletin boards or elsewhere on property is prohibited, except as authorized by the head of the facility or his designee or when such distributions or displays are conducted as part of authorized Government activities.] (Aug. 22, 1973)

[(J) **Photographs for News, Advertising, or Commercial Purposes**. Photographs for advertising or commercial purposes may be taken only with the written consent of the head of the facility or his designee. Photographs for news purposes may be taken at entrances, lobbies, foyers, or in other places designated by the head of the facility or his designee. *[NOTE: For VA policy with respect to photographing patients and activities on VA property see MP-1, pt. I, par. 410.08.]]* (Aug. 22, 1973)

[(K) **Dogs and Other Animals**. Dogs and other animals, except seeing-eye dogs, shall not be brought upon property except as authorized by the head of the facility or his designee.] (Aug. 22, 1973)

[(L) **Vehicular and Pedestrian Traffic**. Drivers of all vehicles in or on property shall drive in a careful and safe manner at all times and shall comply with the signals and directions of police and all posted traffic signs. The blocking of entrances, driveways, walks, loading platforms, or fire hydrants in or on property is prohibited; parking in unauthorized locations or in locations reserved for other persons or contrary to the direction of posted signs is prohibited. Creating excessive noise on hospital or cemetery premises by muffler cutout, the excessive use of a horn, or other means is prohibited. Operation of a vehicle in a reckless or unsafe manner, drag racing, bumping, overriding curbs, or leaving the roadway is prohibited.] (Aug. 22, 1973)

[(M) **Weapons and Explosives.** No person while on property shall carry firearms, other dangerous or deadly weapons, or explosives, either openly or concealed, except for official purposes.] (Aug. 22, 1973)

[(N) **Demonstrations**

(1) All visitors are expected to observe proper standards of decorum and decency while on VA property. Toward this end, any service, ceremony, or demonstration, except as authorized by the head of the facility or his designee, is prohibited.

(2) For the purpose of the prohibition expressed in this subparagraph, unauthorized demonstrations or services shall be defined as, but not limited to, picketing, or similar conduct on VA property; any oration or similar conduct to assembled groups of people, unless the oration is part of an authorized service; the display of any placards, banners, or foreign flags on VA property unless approved by the head of the facility or his designee; disorderly conduct such as fighting, threatening, violent, or tumultuous behavior, unreasonable noise or coarse utterance, gesture or display or the use of abusive language to any person present; and partisan activities which may be described as commentary or actions in support of, or in opposition to, or attempting to influence, any current policy of the Government of the United States, or any private group, association, or enterprise.] (Aug. 22, 1973)

[(O) **Key Security.** The head of the facility or his designee, will determine which employees, by virtue of their duties, shall have access to keys or barrier card keys which operate locks to rooms or areas on the property. The unauthorized possession, manufacture, and/or use of such keys or barrier cards is prohibited. The surreptitious opening or attempted opening of locks or card operated barrier mechanisms is prohibited.] (Aug. 22, 1973)

[(P) **Sexual Misconduct.** Any act of sexual gratification on VA property involving two or more persons, who do not reside in quarters on the property, is prohibited. Acts of prostitution or solicitation for acts of prostitution on VA property is prohibited. For the purposes of this subparagraph, an act of prostitution is defined as the performance or the offer or agreement to perform any sexual act for money or payment.] (Aug. 22, 1973)

[219 (§1.219). OFFENSES AND PENALTIES

(A) Penalty Limitations. Conduct in violation of the rules and regulations set forth in VA Regulation 218 subjects an offender to arrest and removal from the premises. Whoever shall be found guilty of violating these rules and regulations while on any property under the charge and control of the VA is subject to a fine as set forth in the schedule below or, if appropriate, the payment of fixed sum in lieu of appearance (forfeiture of collateral) as may be provided for in rules of the United States District Court. Violations of VA Regulation 218 not included in the Schedule of Offenses and Penalties subjects an offender to a fine of not more than $50, or imprisonment of not more than 30 days, or both.] (Aug. 22, 1973)

[**(B) Schedule of Offenses and Penalties.** An offender who violates any of the offenses listed below may also be imprisoned for not more than 30 days.

(1) Improper disposal of rubbish on property $40

(2) Spitting on property $5

(3) Throwing of articles from a building or the unauthorized climbing upon any part of a building . . $5

(4) Willful destruction, damage or removal of Government property without authorization $50

(5) Defacement, destruction, mutilation or injury to, or removal, or disturbance of, gravemarker or headstone $50

(6) Failure to comply with signs of a directive and restrictive nature posted for safety purposes $10

(7) Tampering with, removal, marring, or destruction of posted signs $10

(8) Entry into areas posted as closed to the public or others (trespass) $10

(9) Unauthorized demonstration or service in a national cemetery or on other VA property $50

(10) Creating a disturbance during a burial ceremony $25

(11) Disorderly conduct which creates loud, boisterous, and unusual noise, or which obstructs the normal use of entrances, exits, foyers, offices, corridors, elevators, and stairways, or which tends to impede or prevent the normal operation of a service or operation of the facility $25

(12) Failure to depart premises by unauthorized persons $5

(13) Unauthorized loitering, sleeping or assembly on property $5

(14) Gambling–participating in games of chance for monetary gain or personal property; the operation of gambling devices, a pool or lottery; or the taking or giving of bets $40

(15) Operation of a vehicle under the influence of alcoholic beverages or nonprescribed narcotic drugs, hallucinogens, marijuana, barbiturates or amphetamines $50

(16) Entering premises under the influence of alcoholic beverages or nonprescribed narcotic drugs, hallucinogens, marijuana, barbiturates or amphetamines $50

(17) Unauthorized use on property of alcoholic beverages or narcotic drugs, hallucinogens, marijuana, barbiturates or amphetamines $50

(18) Unauthorized introduction on VA controlled property of alcoholic beverages or narcotic drugs, hallucinogens, marijuana, barbiturates or amphetamines or the unauthorized giving of same to a patient or beneficiary $50

(19) Unauthorized solicitation of alms and contributions on premises $5

(20) Commercial soliciting or vending, or the collection of private debts on property $5

(21) Distribution of pamphlets, handbills and flyers $5

(22) Display of placards or posting of material on property $5

(23) Unauthorized photography on premises $10

(24) Failure to comply with traffic directons of hospital police $15

(25) Parking in spaces posted as reserved for physically disabled persons $25

(26) Parking in no parking areas, lanes or crosswalks so posted as marked by yellow borders or yellow stripes $10

(27) Parking in emergency vehicle spaces, areas and lanes bordered in red or posted as EMERGENCY VEHICLES ONLY or FIRE LANE, or parking within 15 feet of a fire hydrant $25

(28) Parking within an intersection or blocking a posted vehicle entrance or posted exit lane $10

(29) Parking in spaces posted as reserved or in excess of a posted time limit $5

(30) Failing to come to a complete stop at a STOP sign $20

(31) Failing to yield to a pedestrian in a marked and posted crosswalk $15

(32) Driving in the wrong direction on a posted one-way street $10

(33) Operation of a vehicle in a reckless or unsafe manner, drag racing, overriding curbs, or leaving the roadway $35

(34) Exceeding posted speed limits $20

(35) Creating excessive noise in a hospital or cemetery zone by muffler cutout, excessive use of a horn, or other means $5

(36) Failure to yield right-of-way to other vehicles $15

(37) Possession of firearms, carried either openly or concealed, whether loaded or unloaded (except by Federal or State law enforcement officers on official business) $50

(38) Introduction or possession of explosives, or explosive devices which fire a projectile, ammunition, or combustibles $50

(39) Knives which exceed a blade length of 3 inches; switchblade knives; any of the variety of hatchets, clubs and hand held weapons; and brass knuckles $25

(40) The unauthorized possession of any of the variety of incapacitating liquid or gas emitting weapons . . $25

(41) Unauthorized possession, manufacture, or use of keys or barrier card type keys to rooms or areas on the property $35

(42) The surreptitious opening, or attempted opening, of locks or card operated barrier mechanisms on property $50

(43) Soliciting for, or the act of, prostitution $50

(44) Any unlawful sexual activity . . . . . $40] (Aug. 22, 1973)

[220 (§1.220). ENFORCEMENT AND OTHER LAWS

(A) Facility VA police and investigators found qualified and duly appointed by heads of facilities to act as special investigators for the purposes of 38 U.S.C. 218(a)(3), will enforce VA Regulations 218 and 219 and other Federal laws on VA property in accordance with operating procedures issued by respective VA department Directors and under the direction of the head of the facility.] (Aug. 22, 1973)

[(B) Nothing contained in VA rules and regulations set forth in VA Regulations 218 and 219 shall be construed to abrogate any other Federal laws or regulations or any State and local laws and regulations applicable to the area in which the VA property is situated.] (Aug. 22, 1973)

Question 4. Statistics regarding the number of persons who have been fined or imprisoned and the total amount of fines collected for each of the past three years.

Answer. The primary method of enforcing VA Regulations issued under 38 U.S.C. 218 is through the United States District Courts and the Supreme Court's "Rules of Procedure for the Trial of Minor Offenses Before United States Magistrates." A copy of these rules are provided as Attachment A.

Provided as Attachment B are statistics representing the total number of United States District Court Violation Notices issued at VA medical centers for Fiscal Years 1981, 1982 and 1983 in the enforcement of VA Regulations 218 and 219. Statistics are not maintained on final court dispositions of fines and trials of fines and trials resulting from these citations.

Fines collected by the U.S. District Courts are paid directly into the U.S. Treasury.

ADMINISTRATIVE OFFICE OF THE U.S. COURTS,
SUPREME COURT BUILDING,
Washington, D.C., February 1, 1971.

To U.S. District Judges and U.S. Magistrates:

The Supreme Court of the United States, by order dated January 27, 1971, approved "Rules of Procedure for the Trial of Minor Offenses Before United States Magistrates." A set of the new rules is enclosed. They supersede the rules which were adopted by the Court on May 19, 1969.

Sincerely yours,

ROWLAND F. KIRKS, *Director.*

Enclosure.

[Excerpts from "Rules of Procedure for the Trail of Minor Offenses Before United States Magistrates"]

RULES OF PROCEDURE FOR THE TRIAL OF MINOR OFFENSES BEFORE U.S. MAGISTRATES

RULE 1. SCOPE

These rules govern the procedure and practice for the trial of minor offenses (including petty offenses) before United States magistrates under Title 18, USC § 3401, and for appeals in such cases to judges of the district courts. To the extent that pretrail and trial procedure and practice are not specifically covered by these rules, the Federal Rules of Criminal Procedure apply as to minor offenses other than petty offenses. All other proceedings in criminal matters, other than petty offenses, before United States magistrates are governed by the Federal Rules of Criminal Procedure.

RULE 2. MINOR OFFENSES OTHER THAN PETTY OFFENSES

(a) *Complaint or Information.* The trial of a minor offense, other than a petty offense, may proceed on a complaint filed with the magistrate or on an information filed with the clerk of the district court. The district court, by order or local rule, may make provision for the reference of such information to a magistrate.

(b) *Appearance.* Upon the defendant's appearance, the magistrate shall inform him of the complaint or information against him and of any affidavit filed therewith, of his right to retain counsel, of his right to request the assignment of counsel if he is unable to obtain counsel, and the general circumstances under which he may secure pretrial release. The magistrate shall also explain to the defendant that he has a right to trial before a judge of the district court and a jury and, if the prosecution is on a complaint, that he has a right to have a preliminary examination before the magistrate unless he consents to be tried before the magistrate.

(c) *Consent; Arraignment.* If the defendant signs a written consent to be tried before the magistrate which specifically waives trial before a judge of the district court and a jury, the magistrate shall take the defendant's plea to the charge set forth in the complaint or information. The defendant may plead not guilty, guilty or, with the consent of the magistrate, nolo contendere. If the defendant indicates a desire to plead guilty or nolo contendere, the magistrate shall proceed in accordance with the requirements of Rule 11 of the Federal Rules of Criminal Procedure. If the defendant pleads not guilty, the magistrate shall either conduct the trial immediately or fix a time for the trial.

(d) *Trial*

(1) *Date of trial.* The date of trial shall be fixed at such time as will afford the defendant a reasonable opportunity for preparation and for representation by counsel if desired.

(2) *Procedure.* The trial shall be conducted as are trials of criminal cases in the district court by a district judge without a jury.

(3) *Record.* Proceedings under this rule shall be taken down by a reporter or recorded by suitable sound recording equipment.

RULE 3. PETTY OFFENSES

(a) *Complaint or Citation.* The trial of a petty offense may proceed on an information filed with the clerk of the district court or on a complaint, citation, or violation notice filed with the magistrate.

(b) *Consent; Arraignment.* The magistrate shall state to the defendant the charge against him and shall inform the defendant of his right to counsel and to a trial in the district court. If the defendant signs a written consent to be tried before the magistrate which specifically waives trial before a judge of the district court, the magistrate shall take the defendant's plea to the charge. The defendant may plead not guilty, guilty or, with the consent of the magistrate, *nolo contendere.* If the defendant pleads not guilty, the magistrate shall either conduct the trial immediately or fix a time for the trial, giving due regard to the needs of the parties to consult with counsel and to prepare for the trial.

(c) *Trial.*

(1) *Procedure.* The trial shall be conducted as are trials of petty offenses in the district court by a district judge without a jury.

(2) *Record.* Unless the defendant waives in writing the keeping of a verbatim record, proceedings under this rule shall be taken down by a reporter or recorded by suitable sound recording equipment.

RULE 4. WARRANT OR SUMMONS

(a) *Citation or Violation Notice.* If a defendant fails to appear in response to a citation or violation notice, a summons or a warrant for his arrest may be issued by the magistrate. No warrant may issue unless the essential facts of the offense charged in the citation or violation notice establish probable cause and are supported by oath.

(b) *Failure to Appear.* If a defendant fails to appear before the magistrate when summoned or otherwise ordered by the magistrate to appear, the magistrate may summarily issue a warrant for his immediate arrest and appearance before the magistrate.

RULE 5. ORDERS SUBJECT TO REHEARING BY DISTRICT JUDGES

A decision or order by a magistrate which, if made by a judge of the district court, could be appealed by the government under any provision of law, shall be subject to rehearing de novo by a judge of the district court upon motion for such rehearing filed with the magistrate by the attorney for the government witin 10 days after the entry of the order. Upon the filing of such a motion, the magistrate shall promptly transmit the motion and all records in the case to the clerk of the district court. The magistrate shall not proceed further with the case until the matter to be reheard, including any available appeal, has been determined.

RULE 6. TRANSFER OF CASES

(a) *Minor Offenses other than Petty Offenses.* Cases of minor offenses, other than petty offenses, may, upon transfer under Rule 20 of the Federal Rules of Criminal Procedure, be referred to a magistrate for plea and sentence, if authorized by rule or order of the district court.

(b) *Petty Offenses.* A defendant charged with a petty offense who is arrested, held, or present in a district other than that in which an information, complaint, citation, or violation notice is pending against him may state in writing before a magistrate that he wishes to plead guilty or nolo contendere, to waive trial in the district in which the proceeding against him is pending, and to consent to disposition of the case in the district in which he was arrested, is held, or is present. The magistrate shall thereupon transmit the statement to the magistrate before whom the proceeding is pending. Upon receipt of the defendant's statement, the magistrate before whom the proceeding is pending shall transmit the papers, or certified copies thereof, to the clerk of the district court for the district in which the defendant was arrested, is held, or is present for reference to a magistrate and the proceeding shall continue in that district.

(c) *Not Guilty Plea after Transfer.* If, after the proceeding has been transferred pursuant to this rule, the defendant pleads not guilty, the magistrate shall send the

papers to the clerk of the district court for return to the magistrate in the district where the proceeding was originally commenced for restoration to the docket. The defendant's statement that he wishes to plead guilty or nolo contendere, shall not be used against him.

RULE 7. NEW TRIAL

The magistrate, on motion of a defendant, may grant a new trial if required in the interest of justice. The magistrate may vacate the judgment if entered, take additional testimony, and direct the entry of new judgment. A motion for a new trial based on the ground of newly discovered evidence may be made only before or within 180 days after final judgement, but if an appeal is pending the magistrate may grant the motion only on remand of the case. A motion for a new trial based on any other grounds shall be made within 7 days after a finding of guilty or within such further time as the magistrate may fix during the 7-day period.

RULE 8. APPEAL

(a) *Notice of Appeal.* An appeal from a judgment of conviction by a magistrate to a judge of the district court shall be taken within 10 days after entry of the judgment. An appeal shall be taken by filing with the magistrate a notice stating that the defendant appeals from the judgment, and by serving a copy of the notice upon the United States Attorney, personally or by mail.

(b) *Record.* The magistrate shall forward to the clerk of the district court the original papers and exhibits in the case together with any transcript, tape, or other recording of the proceedings, and a certified copy of the docket entries. These shall constitute the record on appeal. Any expense in connection therewith shall be borne by the government.

(c) *Stay of Execution; Release Pending Appeal.* The provisions of Rule 38(a) of the Federal Rules of Criminal Procedure relating to stay or execution shall be applicable to a judgment of conviction entered by a magistrate. The defendant may be released pending appeal by the magistrate or a district judge in accordance with the provisions of law relating to release pending appeal from a judgment of conviction of a district court.

(d) *Scope of Appeal.* The defendant shall not be entitled to a trial de novo by the judge of the district court. The scope of appeal shall be the same as on an appeal from a judgement of a district court to a court of appeals.

RULE 9. PAYMENT OF FIXED SUM IN LIEU OF APPEARANCE

When authorized by local rules of the district courts in cases of petty offenses as defined in Title 18, USC, § 1(3), payment of a fixed sum may be accepted in lieu of appearance and as authorizing the termination of the proceeding.

RULE 10. RECORDS

The magistrate shall keep such records in criminal proceedings as the Director of the Administrative Office of the United States Courts, with the approval of the Judicial Conference of the United States, may prescribe.

RULE 11. RULES OF COURT

(a) *Local Rules by District Courts.* Rules adopted by a district court for the conduct of trials before magistrates shall not be inconsistent with these rules. Copies of all rules made by a district court shall, upon their promulgation, be filed with the clerk of the district court and furnished to the Administrative Office of the United States Courts.

(b) *Procedure Not Otherwise Specified.* If no procedure is especially prescribed by rule, the magistrate may proceed in any lawful manner not inconsistent with these rules or with any applicable statute.

U.S. DISTRICT COURT VIOLATION NOTICES ISSUED

	Fiscal year—		
	1981	1982	1983
Traffic	42,390	48,017	48,341
Nontraffic	2,969	3,992	2,731
Total	45,359	52,009	51,072
Estimated (low) amount based on $10 penalty	$453,590	$520,090	$510,720

Question 5. A copy of current VA policy regarding police officer uniforms and the furnishing of necessary weapons and belts.

Answer. Attachment A is extracted pages from the DM&S security and law enforcement program manual which delineates police uniform and appearance standards (paragraph 17).

Attachment B is extracted pages from the DM&S policy manual governing overall employee uniform requirements. Specific references to VA police uniforms and allowance are contained on page 7-2 (paragraph 7.06i), page 7-3 (paragraph 7.07b), pages 7A-4 and 7A-5, and page 7B-1.

[Excerpts from DM&S Supplement, MP-1, Part I, Change 39, October 31, 1982]

17. VA POLICE UNIFORM AND APPEARANCE

a. Uniform Policy:

(1) VA Police Officers will wear uniforms as prescribed in M-1, part VII, chapter [8]. Locally procured badges, shoulder patches, and variations in basic uniform color and style are *not authorized.*

(2) Official VA police breast and cap badge sets are centrally issued only for wear by personnel employed under the [OPM] GS-083 police series qualification standards. Numbered badge sets will be requisitioned from the VA Police School (Bldg. 104), VA Medical Center, North Little Rock, Arkansas, 72206, using VA Form 60-134, Combination Requisition and Shipping Ticket. The VA Form 60-134 will be completed to include all basic information and the statement certifying employee appointments under the [OPM] GS-083 qualifications standards as shown in figure 2.4. Shoulder patches will be automatically issued with each badge set. Numbered badges are not transferable. They will be collected on termination of employment of the police officer to whom issued. VA Form 10-2237 will be used for turn-in purposes and submitted, with badges, in the same manner as set forth above for requisitions.

(3) All items of uniform *except the CIP weapon* may be worn by police officers en route between home and center.

(4) The uniform will be worn in the manner prescribed as follows:

(a) Cap. The cap will be worn squarely on the head. Caps will be worn during all duty hours, including vehicle duty, except when the police officer is on desk duty in the watch office, or other office assigment.

(b) Trousers. The real length of the trousers will be approximately 1 inch above the point where the heel is attached to the shoe. Female police officers will wear slacks or knee length skirts.

(c) Shirts. White uniform shirts worn when a police officer reports for duty will be clean and unwrinkled. When long sleeve shirts are worn as an outer garment, suspenders will not be worn or sleeves folded back or rolled up.

(d) Ties. A solid black [or dark blue] four-in-hand choke proof tie fitting snugly at the collar will be worn at all times with the long sleeve shirt. When the short sleeve shirt is worn as an outer garment, a tie is not required.

(5) Insignia and accessories will be worn as set forth below:

(a) Badge. The badge will be worn on the left breast of the uniform outer garment, whether such garment is a shirt, overcoat, or raincoat. If the type of outer garment is changed the badge will be transferred accordingly.

(b) Cap Badge. The cap badge will be worn squared and securely fastened above the visor of the cap.

(c) Chin Straps. Police officers and supervisors will wear the authorized blue cap with black chin strap.

(d) Chevrons. Blue or gold chevrons will be worn on sleeves. The point of the chevron will be toward the shoulder and placed 6 inches from the shoulder seam of the garment.

(e) Bars. Rank insignia of police officers above the rank of sergeant will be worn on both shirt collars parallel to and 1 inch from the tie knot edge of the collar.

(f) Identification Nameplate. All police officers will wear a name plate on the right breast with the bottom of the plate at the top seam of the right pocket, centered on the pocket of the shirt or coat, whichever is worn as the outer garment. When the overcoat is worn, the plate will be pinned in approximately the same position on the overcoat.

(g) Shoulder Patches. VA police emblem patches will be worn on the uppermost portion of left uniform shirt and jacket sleeves. Locally designed uniform patches, the wearing of patches in a manner other than as described above, and the wearing of insignia accessories other than those described in this paragraph are unauthorized.

b. Standards of Appearance:

(1) General. Each member of the [security unit] expected to maintain a high standard of personal hygiene and uniform appearance. Each police officer is expected to wear a neat, clean, and well-pressed uniform and have his or her blacked laced shoes, of plain design, in good repair and shined to a luster. The supervisor is responsible for setting a good example and inspecting each police officer and guard for comformance to uniform and appearance standards at the beginning of each watch.

(2) Grooming. The following standards are not an attempt to depersonalize an individual by requiring or prohibiting mustaches or special styles of haircuts, provided such mustaches and hair styles are neat in appearance, do not interfere with or detract from proper wearing of uniforms or equipment, and do not expose the officer or guard to unnecessary hazards during emergency situations.

(a) The face is excepted to be kept clean shaven, except a mustache will be permissible. If worn, a mustache will be kept neatly and evenly trimmed so that no portion of the mustache will extend more than one-quarter inch below or beyond the line of an individual's upper lip.

(b) Hair should be worn neatly trimmed and not extend below the shirt collar.

(c) Sideburns should be neatly trimmed and straight and not extend past the lower edge of the ear nor be wider than 1½ inches at the bottom.

c. Equipment Wear:

(1) The DM&S standard CIP weapon will be worn with the holster on the left side.

(2) The handcuff case will be positioned over the right back trouser pocket.

(3) The uniform positioning of other items of equipment such as key holders, flashlights, and so forth will be specified by the Security Unit Chief.

CHAPTER 7. EMPLOYEE UNIFORMS

7.01 GENERAL

This chapter outlines DM&S policy for furnishing and servicing employee uniforms. This chapter designates employees who are required to wear a uniform; describes the major articles that make up the uniform; denotes whether uniforms are to be provided by issue or by an allowance paid to the employee; and outlines wearing requirements. Uniforms are authorized in accordance with 5 U.S.C. 5901-5903, and as interpreted and implemented by the Office of Management and Budget. Uniforms are furnished to employees only when it is in the best interest of the VA. In general, hospital employees having frequent contact with patients in ward or treatment areas will wear a uniform.

7.02 DEFINITIONS

a. "Employee" includes full-time and part-time employees of the VA, but excludes volunteers, and trainees and workers who receive a stipend or salary from a source other than VA appropriated funds, and other workers in similar categories.

b. "Uniform" refers to distinct articles of clothing described in appendix 7A.

c. "Special purpose (protective) clothing" are items furnished as a safeguard against possible injury or cross infection. Protective items include such things as isolation gowns, operating room clothing, aprons, hairnets for food handlers and other related items. This clothing is purchased from operating funds and processed through the laundry in lots much like hospital linen. (See MP-4, pt. V, app. B-2, subaccount 2660.) Protective clothing is not intended for the convenience or comfort of the employee, nor to protect employee's personal clothing or uniforms from the normal amount of soil or wear encountered in performing duties of the position. Items of protective clothing are not uniforms.

7.03 UNIFORM SELECTION

a. Considerations used to determine the type of material and style of uniforms selected for issue are laundering and finishing costs, appearance and suitability of the garment to the environment where it will be worn.

b. Employees who purchase their own uniforms are expected to select clothing appropriate to the propriety of a medical setting.

c. Employees should dress according to standards set by their professional or occupational organizations.

7.04 PROCUREMENT AND ACCOUNTABILITY

a. Employees who are paid a uniform allowance will provide themselves with all articles comprising the uniform except as authorized in appendix 7A.

b. The source of supply for durable press uniforms is subject to frequent change. Stations will use the source designated by the VA Marketing Center. The VA will not procure uniforms for resale to employees.

c. Issue uniforms remain the property of the VA after they have been issued and will be turned in by employees who no longer require them for official duty. Employees will be required to reimburse the VA for loss or damage when due to employee negligence.

d. VA Form 10-1148, Employee Uniform and Property Issue Card, will be used to account for issue uniforms.

7.05 WEARING REQUIREMENTS

a. Employees will be required to wear the standard uniform described in appendix 7A while on duty, except for deviations and exceptions contained in paragraph 7.06. Standard uniforms are listed first in order in appendix 7A. All other listings are considered options.

b. Individuals serving the VA in a WOC status or under one of the Federally sponsored youth assistance programs, and patients and members assigned duties in a therapeutic program will be issued the same type uniforms as that worn by VA employees who perform similar duties.

c. The station Director may authorize employees to wear issue uniforms to and from work. (See MP-5, pt. I, ch. 610.)

7.06 DEVIATIONS AND EXCEPTIONS

a. Station Directors are authorized to determine when wearing a uniform is not consistent with the duties of the position, and to prescribe when the uniform will not be required. In no case will an employee who does not wear a uniform while on duty be paid a uniform allowance.

b. Station Directors are authorized to select the method, issue or allowance, for providing uniforms for rotating interns and residents which is the most economical and compatible with the system used at the other teaching hospitals.

c. Where appendix 7A provides an optional style or color uniform, station Directors are authorized to determine when the alternate uniform is appropriate and to give employees the option of its use.

d. Employees eligible for issue uniforms will be provided only one type at any given time. Frequent changes in style will not be permitted.

e. When a position title changes without a significant change in duties or position requirements, employees assigned in the position will continue to wear the same type uniform.

f. When an organization or classification title used at a station differs from the position shown in appendix 7A, the station Director will select the appropriate type uniform. Similarity of requirements of positions will be the determining factor.

g. The station Director may authorize employees to wear personal clothing while on duty when it is the opinion of the professional staff that benefits to patients may result. This should be at the employees option since affected employees will not be entitled to issue uniforms, uniform allowance or laundry service at VA expense during period when personal clothing is worn.

h. Station Directors may permit employees eligible for issue uniforms to wear personally owned uniforms while on duty, provided personal uniforms are equal in quality and are the same color and of similar design as the standard issue uniform. This may also include personally owned culotte type outfits for female employees which meet quality and color requirements of the standard uniform.

i. Medical District Directors are authorized to approve deviation requests from medical care facilities concerning the style and color of uniforms for employees who receive a uniform allowance with the exception of hospital police.

j. Medical District Directors are authorized to disapprove deviation requests from medical care facilities.

7.07 IDENTIFICATION INSIGNIA

a. A shoulder patch, button or other insignia to indicate membership in, or certification by, an approved professional or occupational organization may be worn when approved by the station Director. The cost of such insignia will be borne by the employee.

b. Only issued badges prescribed in appendix 7A and cloth replicas of the U.S. Flag issued with badge sets will be worn by VA Hospital Police Officers.

c. Employees whose duties routinely bring them into contact with patients or patient/members should wear an easily read identification badge showing names and position titles. Identification badges may be furnished at VA expense.

7.08 ALTERATION, REPAIR AND REPLACEMENT

a. Government issue uniforms may be altered and repaired at VA expense.

b. Personally owned uniforms will not be altered or repaired at VA expense. An exception may be made for a garment damaged while being processed in a VA laundry.

c. Issue uniforms will be replaced when rendered unserviceable through normal use on an item-for-item basis.

7.09 LAUNDRY AND DRYCLEANING

a. Any uniform prescribed in appendix 7A and worn by an employee while performing official duty, may be processed at VA expense, provided the uniform does not require pressing. (See pars. 6.01 and 6.03a(3).)

b. The maximum weekly quantity of uniforms which may be processed for each employee will be established and approved by the station Director. Except for usual circumstances, this will be limited to one clean uniform for each duty day.

7.10 UNIFORM ALLOWANCE

a. When authorized in appendix 7A and prescribed uniforms are worn, an allowance will be paid employees for the purpose of offsetting the cost for uniforms. The rates payable are specified in appendix 7B.

b. Payment for the first year of uniformed service will be made by direct payment to an employee entering on duty in a job subject to the uniform requirements, or whose job is made subject to uniform requirements. The first year payment will be included with the first salary payment to the employee.

c. Payment for subsequent years of uniformed service will be made as a biweekly pay period allowance. The pay period allowance will be effective at the beginning of the first pay period following completion of the first year of service.

d. An employee who transfers between positions with different uniform requirements will be entitled to receive payment for the first and subsequent years of uniformed service as outlined in subparagraphs b and c above.

e. A change in style or color of the prescribed uniform will not entitle employees to the first year payment of the employee uniform allowance. Affected employees will be permitted to continue wearing obsolete uniforms until replaced through normal wear.

f. The initial allowance payable to a part-time or intermittent employee, who is otherwise eligible for a uniform allowance will be based on the maximum number of duty hours authorized by the appointment document. The biweekly allowance will be based on the employee's established tour and any additional hours worked not in excess of 40 hours in a week.

g. The amount payable to a full-time employee who serves only part-time where a uniform is required will be determined by adjusting the annual allowance to conform to the limited period uniforms are worn.

h. Employees appointed for periods of less than 1 year or substitute employees may be provided uniforms by issue in lieu of paying the uniform allowance.

i. No employee will be required to make a refund of the first year payment of the uniform allowance.

j. The first year payment is not authorized for an employee who transfers between positions subject to the same uniform requirements.

k. In no case will an employee who does not regularly wear a uniform while on duty be paid a uniform allowance.

l. The biweekly allowance will not be reduced for periods of leave with pay, unless it is known that the employee will not return to duty at the expiration of such leave. In such cases, the allowance will be discontinued as of the date it becomes known that no return to duty will occur. No reduction for leave without pay will be made unless the period of leave without pay covers a complete pay period.

m. Eligible employees appointed on or after December 7, 1975, will be entitled to the first year payment of the uniform allowance.

7.11 UNIFORM ISSUE

a. The number of uniforms issued each employee should be the minimum required to assure that a clean uniform is available each day. At stations using the bundle system, five uniforms per employee are normally adequate. Where the even exchange system is used, three uniforms per employee are normally adequate.

b. At stations using the bundle system, issues in excess of five per employee may be justified when frequent laundry service is not available. In no instance will the total cost of all uniforms issued to an individual employee exceed $125 during any 1 calendar year.

c. Uniforms purchased by the VA will not be furnished to employees who receive a uniform allowance.

d. Records of the cost of uniforms purchased for issue will be kept separate from the cost of linen and protective clothing. (See MP-4, pt. V, app. B-2, subaccount 2666.)

UNIFORMS PRESCRIBED FOR WEAR BY VA EMPLOYEES

Position	Type Uniform	Provided by
	ENGINEERING SERVICE—Continued	
Male	Shirt, Sport, D/P, White, and Trousers, D/P, White	Issue
Operators of Plants, Equipment and Motor Vehicles and Employees in Trades, Crafts, and Service Units		
Female	Pants, D/P, Light Green, and Tunic, D/P, Light Green, or	Issue
	Dress, D/P, Light Green	Issue
Male	Shirt, D/P, Light Green, and Trousers, D/P, Forest Green	Issue
Fire Chief, Fire Fighters, Fire Prevention Inspectors		
Female	Same as Male except Pants, Blue, or Skirt, Blue	Allowance
Male	Cap, Visor, Bell Type Crown, Blue Coat Short, Blue Trousers, Blue Shirt, Long or Short Sleeves, Blue Tie, Black (Optional)	Allowance
	Insignia, Cap, VA Legend and Seal	Issue
Guard	Same as Fire Chief and Fire Fighters, except Cap, Police Style, 8 Point Type Crown, Blue	Allowance
Police Officers		
Male	Police Style Cap With Black Visor and Strap, High Front Rounded crown, blue. Coat, Short, Blue. Blue Trousers. Shirts, Long and Short Sleeve, White Only. Tie, Choke Proof, Blue. Shoes, Plain Toe, Black.	Allowance
	Belt, Leather, Black.	Issue
	Handcuffs with Fully Enclosing Case.	Issue
	CIP weapon and holster, Smith and Wesson.	Issue
	VA Police Badge Set.	Issue
	VA Police Shoulder Patch.	Issue

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UNIFORMS PRESCRIBED FOR WEAR BY VA EMPLOYEES

Position	Type Uniform	Provided by
	ENGINEERING SERVICE—Continued	
	Chevrons, Blue or Gold:	Issued
	GS-5, One Chevron Set	
	GS-6, Two Chevron Set	
	GS-7, Three Chevron Set	
	Collar insignia, nickel, miniature:	Issue
	GS-8, Single Bar Set	
	GS-9, to 11, Twin Bar Set	
Female	Same as for male except Optional Skirt, Blue, and Navy WAVE Cap or Similar Style.	Allowance
	LABORATORY SERVICE	
Technicians and Technologists		
Female	Pants, Tailored, White, and Tunic, White, or	Allowance
	Dress, White	Allowance
Male	Shirt, Sport, White, and Trousers, White	Allowance
Laboratory Helpers, Aids and Autopsy Assistants		
Female	Pants, D/P, White, and Tunic, D/P, White, or	Issue
	Dress, D/P, White	Issue
Male	Shirt, Sport, D/P, White, and Trousers, D/P, White	Issue
Biological Laboratory Aids (Animal)		
Female	Smock, Reversible, D/P, White, or	Issue
	Dress, D/P, White	Issue
Male	Smock, Reversible, D/P, White, or	Issue
	Shirt, "T", White, and Trousers, D/P, White	Issue
	MEDICAL ILLUSTRATION SERVICE	
Medical Illustrators and Photographers		
Female or Male	Smock, Reversible, D/P, White	Issue

UNIFORM ALLOWANCE RATES

Employee	Initial Allowance	Per Annum Allowance	Pay Period Rate	Hourly Rate
Dental Assistant and Hygienist				
Female	3.25	58.60	2.26	.0282
Male	78.25	62.60	2.41	.0301
Dental Resident and Intern (Other than career)				
Female	73.25	58.60	2.26	.0282
Male	78.25	62.60	2.41	.0301
Dietitian, Dietetic Interns Food Service Managers				
Female	73.25	58.60	2.26	.0282
Male	78.25	62.60	2.41	.0301
Firefighter				
Guard/Chauffer (Motor Vehicle Operator)				
Fire Prevention Inspector	125.00	124.80	4.80	.0600
Matron (Domiciliary only)	73.25	58.60	2.26	.0282
Nurse Registered				
Female	73.25	58.60	2.26	.0282
Male	78.25	62.60	2.41	.0301
Nurse, Practical/Vocational				
Female	73.25	58.60	2.26	.0282
Male	78.25	62.60	2.41	.0301
Pharmacist, Including Intern and Resident				
Female	73.25	58.60	2.26	.0282
Male	50.35	40.30	1.55	.0194
Policeman and Policewoman	125.00	124.80	4.80	.0600
Recreation Specialists (Adapted sports)				
Female	72.45	57.98	2.23	.0279
Male	72.45	57.98	2.23	.0279
Resident Physician and Intern (Other than career)				
Female	73.25	58.60	2.26	.0282
Male	78.25	62.60	2.41	.0301

Question 6. The VA cost estimate on H.R. 3876 is based on reports from 58 percent of your facilities. Your estimate that each veteran who became eligible for drugs and medicines under this legislation would receive 36 prescriptions each year. Do you have any information to support your assumption that veterans receiving fee-basis care are similar to veterans who seek private care for their service-connected disability?

Answer. There is no specific information available to us to support this assumption. It is felt that treatment by a physician, specifically in prescribing medications would be similiar, irrespective of whether the VA or the patient is paying for the treatment. It is also assumed that veterans who pay for their own treatment would seek it in a fashion similar to those who are on an authorized fee-basis program, and receive medication in like quantities. These positions were assumed in order to provide a basis for estimating the number of prescriptions and refills of those prescriptions that could normally be expected for veterans covered under H.R. 3876.

Question 7. It is the figure of 36 prescriptions reasonable in your costing of our bill, when the bill would authorize medicine only for a compensable service-connected disability?

Answer. We believe the estimated figure of 36 to be reasonable for the number of times per year medication would be issued to veterans covered under H.R. 3876, whether from a new prescription or refills of prescription previously received. Our VA experience has shown that on an average each veteran visit results in three prescriptions being filled. When continuous care is involved, up to five additional refills may be provided if ordered by the physician. The average of 12 prescriptions per year written by fee physicians and filled in non-VA pharmacies involve those medications which must be started at once. Subsequent refills are provided by VA pharmacies. Any other prescriptions not required to be started at once are sent to the VA pharmacy for filling and refills if ordered. Based on this and other changes, modifications or additional prescriptions written for treatment of a particular disability leads us to believe that the figure of 36 is realistic for a group of persons who have specific disabilities requiring continuous care, versus those who do not and who only seek occasional care and treatment.

Question 8. Please tell us how many weeks of training Federal Protective Officers employed by GSA receive. How many weeks do U.S. Capitol police receive? Please supply us with the names of any security operation known to you where only a week of training if provided.

Answer. We are informed by GSA Federal Protective Service and the U.S. Capitol Police that police officers entering those agencies undergo an eight-week police training program at the Federal Law Enforcement Training Center, Glynco, Georgia. The U.S. Capitol Police further provide an eight-week in-house training program and GSA provides a two-week refresher course at the Federal Law Enforcement Training Center after five years of service.

We know of no agency other than the VA where only a week of training is provided to new police officers. However, the VA adheres rigidly to OPM qualification standards which require that applicants possess two years prior police experience or substitute education at the college level. OPM has also provided the VA with a special police applicant qualification crediting plan through which qualifications can be thoroughly verified. In contrast, GSA, U.S. Capitol Police, and most other Federal, state and municipal police agencies have elected and are prepared to conduct basic police recruit training. It is the VA, and specifically the DM&S position, that the rendering of a total police occupational training program, i.e. the delivery of recruit training if far afield of the VA's mission and that a successful agency orientation of police officers already well qualified in police procedures is a sound alternative.

Question 9. How much money did the VA spend on continuing training for police officers? How many courses, or how much classroom time, is needed to keep employees abreast of revisions to criminal law and advances in police techniques?

Answer. Since 1973, the VA has spent approximately one million dollars in the continuing operation of its forty hour program of instruction for VA police officers. A total of 172 courses were presented to train 4,190 police officers. It is our opinion that revisions to criminal law and advances in police procedures are not frequent or severe enough to warrant special courses at the facility self-protection security police force level. Whereas detailed case law study is a necessity for FBI agents and prosecuting attorneys, any changes in basic police procedures are easily transmitted through technical departmental channels or changes to policy. We have experienced no difficulties whatever in providing clear instructions and suitable training materials to the field where changes have been necessary or new procedures are initiated.

Question 10. If VA had the authority to set pay in accordance with the experience level needed for police work and could adjust salaries to account for recruiting and

retention difficulties and geographic cost-of-living differences, could you readily identify where pay is adequate or inadequate? What type of information is available for VA to distinguish between locations such as Philadelphia, Chicago, Biloxi or Tampa?

Answer. The VA would be able to identify those locations where pay for police officers was adequate or inadequate as part of any new pay setting authorities the agency receives. Presently, the agency only has very general staffing information available on police officers at all VA medical centers. This would enable VA to make broad distinctions between those medical centers with serious police staffing problems and those with minor or no staffing problems. It would be necessary, for the agency to determine the exact magnitude of a serious staffing problem, to require medical centers to submit more detailed staffing and salary survey data. Such data should be readily available at each medical center and would enable the agency to determine what kind of pay setting authorities would help a facility eliminate its problems. This assistance may be in the form of approving special rates, spreading rates or both.

Question 11. On page 8 of Dr. Custis' statement, it is stated that you believe that the Attorney General should concur in regulations concerning the training of police officers. Please advise the Subcommittee of any current activity in this area and the status of any other reviews by the Attorney General in the realm of VA security matters. Also, please provide any proposed guidance on the conduct of security matters issued by the Attorney General or OMB.

Answer. The VA has traditionally respected the Office of the Attorney General as that of the highest Federal law enforcement authority. Any Federal agency which, of necessity, becomes involved in the enforcement of Federal laws and Federal regulations must enter the Federal judicial system to accomplish that enforcement function. Therefore, Federal agency police officers should possess a level of police knowledge and skills which warrant their delegated police powers to the satisfaction of United States Attorneys and they must operate within Federal rules of criminal law and procedures. Our General Counsel staff has been able to provide guidance on the great majority of law enforcement policies and procedures adopted over the years. In those areas of changing law or growing need for extra caution to assure the protection of individual rights, the Department of Justice has been consulted for interpretations of search policy and law enforcement jurisdiction. The responsiveness of the Department of Justice has always been fully considerate of our situations, timely and thorough. Attachments A and B are examples on file of such assistance. Recently, the Office of Management and Budget requested that we review a draft OMB Circular which outlines comprehensive guidelines for determining to what extent an agency requires law enforcement personnel, firearms authorization, arrest and search powers, and other investigative authorities. A copy of this draft OMB Circular is provided as Attachment C.

[Attachments follow:]

UNITED STATES DEPARTMENT OF JUSTICE

WASHINGTON, D.C. 20530

April 13, 1975

Address Reply to the Division Indicated and Refer to Initials and Number

CWB:DJK:jaj

Mr. Howard M. Denney
Assistant General Counsel
Veterans Administration
Washington, D. C.

Re: Proposed Search and Inspection Guidelines for VA Hospital Police; (024)

Dear Mr. Denney:

We are responding to your letter of March 4, 1975, requesting our comment upon your Interim Issue of search and inspection guidelines for Veterans Administration Hospital Police. As you realize, the fourth amendment standard is primarily one of "reasonableness" of the search; differing standards are applied to dissimilar classes of searches. Compare United States v. Harris, 403 U.S. 573 (1971) (probable cause for search for criminal evidence), with Adams v. Williams, 407 U.S. 143 (1971) (reasonable suspicion for investigatory stop), and United States v. Biswell, 406 U.S. 311 (1972) (warrantless inspection of premises of gun dealer). Thus the reasonableness of the search depends on the facts of the case. In light of your better acquaintance with the factual situation in Veterans Administration hospitals, we caution you to view our letter as comment rather than axiom.

I. GENERAL SEARCH

As we understand your guidelines, their primary purpose is to counter any expectation of privacy that a patient or employee might have in nightstands, lockers, or closets. Once this expectation of privacy is thwarted, the fourth amendment protection of privacy is no longer applicable and your agents may engage in a "general search" when they "strongly suspect that prohibited items such as drugs, alcohol or weapons are concealed in an area."

Accepting as a given that you may constitutionally issue such a regulation, your theory is technically sound. Katz v. United States, 389 U.S. 347 (1967). This first premise, however, is in doubt. There are two Supreme Court cases which appear closely pertinent: Stoner v. California, 376 U.S. 483 (1964), and Chapman v. United States, 365 U.S. 610 (1961). In Stoner, a hotel clerk gave police his consent for a search of defendant's room. Although the hotel regulations required that the key to the room be placed in the mail box each time the hotel was left by the occupants, and although there was implied consent for hotel employees in furtherance of their duties to enter the room, the Court found that the constitutional right to privacy was a personal right and could only be waived by the petitioner. Consequently, the search was invalidated. 1/ In Chapman, a landlord authorized the entry of police officers into a tenant's house after the landlord had noticed a strong odor of mash emanating from the dwelling. Paraphrasing Johnson v. United States, 333 U.S. 10, 14 (1948), the Court held that "to uphold such an entry, search and seizure 'without a warrant would reduce the [Fourth] Amendment to a nullity and leave [tenants'] homes secure only in the discretion of [landlords]." 365 U.S. at 616-17.

Apparently a mere property interest does not give the government a right to search. The law of third party consent searches has been succinctly stated in United States v. Matlock, 415 U.S. 164 (1974): authority to consent to a search is found in "mutual use of the property by persons generally having joint access or control for most purposes," not bottomed in the property interest of the third party. Id. at 171 n.7. Cf. Frazier v. Cupp, 394 U.S. 731, 740 (1969). The issue is more closely targeted by the United States v. Blok, 188 F.2d 1019 (D.C. Cir. 1951), genre of cases wherein the property interest of the government is insufficient to counter an expectation of privacy. Cf. United States v. Nasser, 476 F.2d 1111, 1123 (7th Cir. 1973). The clear indication is that the individual's expectation of privacy is to prevail over the governmental interest in criminal searches. A regulation contrariwise will probably not tip the balance, although we hastily add that the need must be determined by a greater wealth of facts than you have revealed to us.

1/ A close reading of this case, however, indicates that there was no California statute that would permit the hotel proprietor to authorize the police to search rooms. 376 U.S. at 488. The Court eschewed ruling on whether or not such a statute could pass constitutional muster. Id.

We recognize, however, the difficulties inherent in the close living quarters as well as the conceivable tension in hospitals. Consequently, a protective search for aggressive instruments (guns, explosives, knives, etc.) in emergent circumstances may be permissible. See Adams v. Williams, 407 U.S. 143 (1972); Terry v. Ohio, 392 U.S. 1 (1968). In like circumstances, a search for essentially "passive" evidence (heroin, stolen goods, etc.) will probably be impermissible. See Sibron v. New York, 392 U.S. 40 (1968). We suggest, therefore, that your general policy be one of no "general searches" without probable cause except in exigent circumstances for aggressive instruments.

II. PERSONAL SEARCHES

You might wish to include a better explanation of the second prong of the test articulated in Aguilar v. Texas, 378 U.S. 108 (1964), and Spinelli v. United States, 393 U.S. 410 (1969): i.e. that the agent must inform the magistrate or judge "of some of the underlying circumstances from which the informant concluded" that the evidence is where he claims it is. Aguilar v. Texas, supra, 378 U.S. at 114.

III. VEHICLE SEARCHES

Unfortunately, we do not fully comprehend your vehicle search directive. If an agent of the government has probable cause that a specific vehicle is carrying criminal evidence, he may stop the car and search it. A warrant is preferable when there is time to obtain it; however, when there is insufficient time to obtain a warrant, one is unnecessary. Chambers v. Maroney, 399 U.S. 42 (1970); Carroll v. United States, 267 U.S. 132 (1925).

You might wish to stress that in a search of a vehicle incident to an arrest, the arrest must be a custodial arrest rather than a mere stop to issue a notice of violation. Cf. Gustafson v. Florida, 414 U.S. 260 (1973); United States v. Robinson, 414 U.S. 218 (1973).

The law of inventory searches of vehicles is presently unsettled, there being an appearance of conflict between the Fifth and Eighth Circuit Courts of Appeals. Compare United States v. Lawson, 487 F.2d 469 (8th Cir. 1973), with United States v. Gravitt, 484 F.2d 375 (5th Cir. 1973), cert. denied, 414 U.S. 1135 (1974),

and United States v. Ducker, 491 F.2d 1190 (5th Cir. 1974). The Fifth Circuit argues that inventory searches have two purposes: (1) to protect the vehicle and the property in it, and (2) to protect the police from claims of lost property. United States v. Ducker, supra, 491 F.2d at 1192. The Eighth Circuit counters that the vehicle and the property in it can be protected every bit as well by rolling up the windows and locking the doors. United States v. Lawson, supra, 487 F.2d at 475-76.

The proper resolution probably lies somewhere between the positions taken by the two circuits. If there is some reason to suspect that the car was operated by someone who might conceal firearms, explosives, or other dangerous articles in the car, than a search will be permitted of the entire car, but only for the purpose of discovering such dangerous articles. The rationale for the search is to protect government agents from potential danger: the danger that might accrue to government agents as well as the general public when the car (containing the firearms) is again turned over to the driver. Cady v. Dombrowski, 413 U.S. 433 (1973), would appear to be of this kind of case. Cf. Adams v. Williams, 407 U.S. 143 (1972); United States v. Biswell, 406 U.S. 311 (1972); Terry v. Ohio, 392 U.S. 1 (1968). If contraband or other evidence of criminal activity come into plain view during a "protective inventory" search, it may be seized and turned over to the appropriate law enforcement agency. Your regulation states that contraband discovered during "an inventory will be seized but will not be used as a basis for initiating criminal charges against the vehicle's owner or operator." We heartily urge you to adopt a contrary policy. As a general rule, if government agents have justifiable cause to search, evidence from that search can be used in a criminal prosecution. If one arm of the government refuses to turn criminal evidence over to another arm, it is hardly a good precedent for urging citizen cooperation with police.

IV. CONSENT SEARCHES

The Supreme Court has rejected the necessity of using forms or Miranda-like language in situations involving consent searches. Schneckloth v. Bustamonte, 412 U.S. 218 (1973). Rather the courts will look at the entirety of the circumstances. Our experience shows that persons will often indicate that they are aware of their Miranda rights but then refuse to sign the FBI's Miranda forms.

In view of the reluctance of persons to sign written waivers, you might wish to change your policy to an oral instruction of fourth amendment rights. If the suspect assents to the search but refuses to sign the waiver, then the search can proceed anyway. We repeat, however, that even this oral notification is unnecessary under the fourth amendment.

We hope that our comments may prove of some assistance.

Sincerely,

JOHN C. KEENEY
Acting Assistant Attorney General
Criminal Division

By: Carl W. Belcher
CARL W. BELCHER
Chief, General Crimes Section

UNITED STATES DEPARTMENT OF JUSTICE

WASHINGTON, D.C. 20530

Address Reply to the Division Indicated and Refer to Initials and Number
PBH:ALH:DJK:jad
151-01

March 2 1979

Mr. Neal C. Lawson
Assistant General Counsel
Veterans Administration
Washington, D. C. 20420

Re: Request for Opinion Regarding VA Police Authority in Leased Buildings

Dear Mr. Lawson:

By letter dated January 12, 1979, you asked for the Criminal Division's opinion on whether premises leased by the Veterans Administration and generally used for medical clinics are "under the jurisdiction" of VA as that phrase is used in 38 U.S.C. § 218(a)(2). We conclude that such premises are "under the jurisdiction" of VA.

Section 218(a)(2) provides that the Administrator, "[f]or the purpose of maintaining law and order and of protecting persons and property on lands . . . and in buildings under the jurisdiction" of VA, may "designate officers and employees of the Veterans Administration to act as special policemen on such property." The legislative history indicates that the provision was meant to apply broadly.

Section 218 of title 38 has its genesis in H.R. 12674 (92d Cong., 2d Sess.) which was pocket vetoed by President Nixon. According to the House Report, the legislation would have applied to national cemeteries, "VA hospitals, domiciliaries, or nursing homes and other VA facilities . . . ." 1/

1/ H. Rep. No. 1069, 92d Cong., 2d Sess. 34 (1972); see S. Rep. No. 1256, 92d Cong., 2d Sess. 47, 53 (1972); 118 Cong. Rec. 19639, 19640, 19643 (1942).

Similarly, the legislative history of the 1973 bills (H.R. 2828 and S.49) shows that Congress intended to be generous in construing the phrase "under the jurisdiction" in section 218. It meant the statute to apply to "all lands and buildings under [the VA Administrator's] jurisdiction." 2/ If acquiring title to land or acquiring "exclusive or concurrent jurisdiction" 3/ determined whether section 218 was applicable, Congress surely would have said so.

Our belief that section 218 must be interpreted broadly is bolstered by the General Services Administration's special police statute, 40 U.S.C. § 318, which served as the pattern for section 218. 4/ In a proviso, the GSA statute specifically limits the phrase "under the jurisdiction" to "Federal property over which the United States has acquired exclusive or concurrent criminal jurisdiction." 5/ Thus we may make two conclusions. First, the phrase "under the jurisdiction" must mean more than merely exclusive or concurrent jurisdiction — otherwise the proviso is useless. Second, by omitting the proviso from 38 U.S.C. § 218, Congress must have intended that section 218 reach more kinds of property than property under the exclusive or concurrent jurisdiction of the United States.

Finally, as you noted in your letter, a leasehold interest is sufficient to bring property within the phrase "property of the United States" in 18 U.S.C. § 1361. 6/ Therefore a lease,

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2/ S. Rep. No. 55, 93d Cong., 1st Sess. 38 (1973); see id. at 34; H. Rep. No. 131, 93d Cong., 1st Sess. 3, 5, 19 (1973); 119 Cong. Rec. 6667, 14392-93 (1973).

3/ 18 U.S.C. § 7(3).

4/ See S. Rep. No. 55, 93d Cong., 1st Sess. 34, 38 (1973); H. Rep. No. 1069, 92d Cong., 2d Sess. 23 (1972); S. Rep. No. 1256, 92d Cong., 2d Sess. 31 (1972); 119 Cong. Rec. 6658, 14393 (1973); 118 Cong. Rec. 19640 (1972).

5/ GSA relies on a provision in its annual appropriations act to give it authority to provide special police on other property.

6/ United States v. Briddle, 443 F.2d 443 (8th Cir.), cert. denied, 404 U.S. 942 (1971).

coupled with possession and control, of premises by VA must be sufficient to bring such premises within the less demanding phrase "under the jurisdiction of the Veterans Administration."

In our opinion, leased premises used by the Veterans Administration as medical clinics are "under the jurisdiction" of VA as that phrase is used in 38 U.S.C. § 218(a)(2).

Please notify us if we may be of further assistance.

Sincerely,

Philip B. Heymann
Assistant Attorney General
Criminal Division

By: Alfred L. Hantman

ALFRED L. HANTMAN, Acting Chief
General Litigation & Legal Advice Sectio

EXECUTIVE OFFICE OF THE PRESIDENT
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SPECIAL

FEBRUARY 7, 1984

LEGISLATIVE REFERRAL MEMORANDUM

TO: SEE ENCLOSED DISTRIBUTION LIST

SUBJECT: Draft OMB Circular, "Guidelines for Legislation Involving Federal Criminal Law Enforcement Authorities"

The Office of Management and Budget requests the views of your agency on the enclosed draft OMB Circular.

Please provide us with your views no later than Tuesday, February 28, 1984. NOTE: Several definitions that appear in this draft Circular also appear in OMB Circular No. A-19. These definitions are not subject to revision.

Direct your questions to Gregory Jones (395-3856), of this office.

James C. Murr for
Assistant Director for
Legislative Reference

Enclosures

cc: C. Horner, Mike Uhlmann, C. Bryant, R. Adkins, D. Kleinberg, A. Curtis, R. Irby, M. Allen, J. Walker, B. Martin, D. Leonard, K. Collins, P. DuSault, D. Taft, B. Selfridge, R. Peterson, N. Sweeney, D. Sitrin, S. Jacobs, D. Crabill

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DRAFT

JANUARY 27, 1984 CIRCULAR NO. A-

TO THE HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES

SUBJECT: Guidelines for Legislation Involving Federal Criminal Law Enforcement Authorities

1. Purpose. This Circular establishes guidelines for (1) the development of proposed legislation to extend criminal law enforcement authorities to agencies and (2) the review of pending bills that would extend criminal law enforcement authorities to agencies. The Office of Management and Budget (OMB) will use these guidelines in coordinating and clearing proposed legislation and reports on pending bills, in accordance with Circular No. A-19.

2. Background. From time-to-time agencies propose legislation that would extend criminal law enforcement authorities (e.g., authority to conduct a warrantless search or to carry a firearm) to themselves or to other agencies. On other occasions, agencies are asked to provide Congress with reports on pending bills that would extend such authority. No guidelines have been available to the agencies, however, to ensure a consistent approach to proposed or pending legislation that contains criminal law enforcement authorities. Guidelines of this nature are necessary in order to provide sound criteria and a systematic process for considering such authorities when proposed, and to avoid unnecessary and undesirable proliferation of criminal law enforcement authorities.

3. Definitions. For the purpose of this Circular, the following definitions apply:

a. Accredited Course of Training. A systematic course of instruction offered by an appropriate Federal law enforcement agency.

b. Agency. Any executive department or independent commission, board, bureau, office, agency, Government-owned or controlled corporation, or other establishment of the Government, including any regulatory commission or board.

c. Covert Investigative Technique. Electronic surveillance, an undercover operation, the use of a paid informant, or any other method of obtaining evidence of crime in a clandestine manner.

d. Pending Bill. Any bill or resolution that has been introduced in Congress or any amendment to a bill or resolution while in committee or when proposed for House or Senate floor consideration during debate. Also, any proposal placed before the conferees on a bill that has passed both Houses.

e. Proposed Legislation. A draft bill or any supporting document (e.g., Speaker letter, section-by-section analysis, or statement of purpose and justification) that an agency wishes to present to Congress for its consideration. Also, any proposal for, or endorsement of, legislation included in an agency's annual or special report or in other written form that an agency proposes to transmit to Congress, or to any Member or committee, officer or employee of Congress, or staff of any committee or Member, or to make available to any study group, commission, or the public.

f. Report (including testimony). Any written expression of official views prepared by an agency on a pending bill for (1) transmittal to any committee, Member, officer, or employee of the Congress, or the staff of any committee or Member, or (2) presentation as testimony before a congressional committee. Also, any comment or recommendation on a pending bill that is included in an agency's annual or special report that an agency proposes to transmit to Congress, or to any Member or committee, officer or employee of Congress, or staff of any committee or Member, or to make available to any study group, commission, or the public.

4. General Policy. In general, an agency should not have criminal law enforcement authority unless:

a. the agency's ability to perform an essential function within its jurisdiction is significantly hampered by its lack of criminal law enforcement authority;

b. the agency's need for such law enforcement authority cannot be met effectively by assistance from law enforcement agencies with such authority;

c. adequate safeguards exist to ensure proper exercise of the authority by the agency; and

d. the advantages attributable to the agency's possession of the authority can reasonably be expected to exceed the disadvantages that are likely to be involved in its exercise of the authority.

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5. Guidelines. Before submitting to OMB for coordination and clearance any proposed legislation or report on a pending bill that would extend criminal law enforcement authority to an agency, an agency shall make a determination that the proposed extension of criminal law enforcement authority is in substantial compliance with the following guidelines, as applicable:

a. Authority to Carry a Firearm. An agency should not be authorized to permit an employee to carry a firearm unless:

(1) there is a significant likelihood that, in the course of performing his assigned duties, the employee will be placed in situations in which his use of a firearm would be permitted by law to:

(i) protect himself from a threat of imminent death, serious bodily injury, or kidnapping;

(ii) prevent another person from causing imminent death or bodily injury to, or kidnapping of, a person who is under his protection; or

(iii) prevent the imminent loss or destruction of property of substantial value that is under his protection;

(2) it is unlikely that timely and effective assistance will be available from another agency;

(3) the employee has completed an accredited course of training in the carrying and use of firearms, and is currently qualified in their use; and

(4) the agency agrees that, if the requested authority is granted, the agency will establish policies and procedures, approved by the Attorney General, for preventing the unauthorized use or misuse of firearms by its employees, including a requirement that an employee's authority to carry a firearm be approved by a designated senior official of the agency on a case-by-case basis.

b. Authority to Seek and Execute an Arrest or Search Warrant. Except as provided in section 5f. of this Circular, an agency should not be authorized to permit an employee to seek and execute an arrest warrant or a search warrant unless the authority is limited to the arrest of a person who has committed an offense within the jurisdiction of the agency, or an offense involving resistance to the employee's authority, or to a search for, and seizure of, property related to such an offense, and:

(1) there is a significant likelihood that, in the course of performing his assigned duties, the employee will frequently encounter situations in which it is necessary to make such an arrest or search;

(2) it is unlikely that timely and effective assistance will be available from another agency;

(3) the employee has completed an accredited course of training in the execution of arrest and search warrants;

(4) the agency agrees that, if the requested authority is granted, the agency will establish policies and procedures, approved by the Attorney General, for preventing the unauthorized use or misuse of the power to seek and execute arrest or search warrants by its employees.

c. Authority to Make a Warrantless Arrest. An agency should not be authorized to permit an employee to make an arrest without a warrant unless the authority is limited to the arrest of a person who the employee has probable cause to believe has committed a felony, or a person who has committed a misdemeanor in the employee's presence, and:

(1) there is a significant likelihood that, in the course of performing his assigned duties, the employee will frequently encounter situations in which it is necessary to make such an arrest promptly;

(2) it is unlikely that timely and effective assistance will be available from another agency;

(3) the employee has completed an accredited course of training in the exercise of the power to arrest; and

(4) the agency agrees that, if the requested authority is granted, the agency will establish policies and procedures, approved by the Attorney General, for preventing the unauthorized use or misuse of the power to arrest by its employees.

d. Authority to Serve a Grand Jury Subpoena or Other Legal Process. An agency should not be authorized to permit an employee to serve a grand jury subpoena, a summons, a court order, or other legal process unless:

(1) there is a significant likelihood that, in the course of performing his assigned duties, the employee will frequently encounter situations in which it is necessary to serve such process;

(2) it is unlikely that service can be made conveniently or expeditiously by personnel of another agency;

(3) the employee has completed an accredited course of training in the service of process; and

(4) the agency agrees that, if the requested authority is granted, the agency will establish policies and procedures, approved by the Attorney General, for preventing the unauthorized use or misuse of the to power serve process by its employees.

e. Authority to Administer an Oath or Affirmation. An agency should not be authorized to permit an employee to administer an oath or affirmation unless:

(1) there is a significant likelihood that, in the course of performing his assigned duties, the employee will frequently encounter situations in which it is necessary or desirable to take a person's statement or testimony under oath or affirmation;

(2) it is unlikely that the oath or affirmation can be administered as conveniently or expeditiously by personnel of another agency;

(3) the employee has been trained in the requirements of administering oaths and affirmations; and

(4) the agency agrees that, if the requested authority is granted, the agency will establish policies and procedures, approved by the Attorney General, for preventing the unauthorized use or misuse of the power to administer oaths and a affirmation by its employees.

f. Authority to Use a Covert Investigative Technique. An agency should not be authorized to permit an employee to use a covert investigative technique unless:

(1) there is a significant likelihood that, in the course of performing his assigned duties, the employee will frequently encounter situations in which it is necessary to use such a technique;

(2) it is unlikely that timely and effective assistance from an agency with expertise in the use of such a technique will be available;

(3) the employee has completed an accredited course of training in the use of such a technique; and

(4) the agency agrees that, if the requested authority is granted, the agency will establish policies and procedures, approved by the Attorney General, for preventing unauthorized use or misuse, or the appearance thereof, of such techniques by its employees, including a requirement that an employee's authority to use a covert investigative technique be approved by a designated senior official of the agency on a case-by-case basis.

6. Additional Explanation. Additional details concerning the interpretation of these guidelines are attached to this Circular.

7. Effective Date. This Circular is effective on publication. Any proposed legislation or report covered by this Circular that has previously been submitted to OMB for coordination and clearance under Circular No. A-19 and is pending before OMB should be withdrawn and reconsidered in light of these guidelines.

8. Inquiries. Questions or inquiries regarding the requirements of this Circular may be directed to the Assistant Director for Legislative Reference, Office of Management and Budget, Room 7202, New Executive Office Building, Washington, D.C. 20503 (telephone: (202)-395-4864). Questions or inquiries regarding criminal law enforcement authorities generally may be directed to the Associate Attorney General, Department of Justice, Washington, D.C. 20530.

David A. Stockman
Director

Attachment

A-1
ATTACHMENT A
Circular No. A-

COMMENTARY ON GUIDELINES FOR LEGISLATION INVOLVING FEDERAL CRIMINAL LAW ENFORCEMENT AUTHORITIES

1. In General. This attachment provides additional detail with respect to the way in which the law enforcement guidelines contained in Circular No. A- are to be interpreted and applied. Citations to particular sections refer to the applicable sections of the Circular.

2. General Policy. Section 4 sets forth in general terms the fundamental criteria to be used in deciding whether to assign criminal law enforcement authority to an Executive branch department or agency whose primary mission is not enforcement of Federal criminal law. Section 5 addresses with greater particularity the issues involved in considering the assignment of specific kinds of law enforcement authority, such as authority to carry firearms or to execute search warrants. Not covered by these guidelines is the issue of providing Federal statutory "protection" against violent crime to employees whose duties include enforcement of Federal law. Although it may be desirable to afford such "protection" to all Federal law enforcement personnel, as a back-up to State statutes covering the same crimes, the issues involved in making that determination are not the same as those raised by proposals to expand an agency's law enforcement powers.

It should be noted at the outset that these guidelines are deliberately couched in the negative. This approach is taken, because indiscriminate grants of law enforcement power within the Executive branch can have undesirable consequences, including the inefficient use of limited law enforcement resources and the imposition of unnecessary burdens on effective Federal law enforcement. Thus, the guidelines emphasize the principle that the assignment of criminal law enforcement authority to an agency whose primary responsibility -- unlike the Federal Bureau of Investigation (FBI), for example -- does not involve enforcement of Federal criminal law should be the exception rather than the rule.

The Circular's statement of general policy describes the essential prerequisites to a grant of any type of criminal law enforcement authority. The first and most important of these requirements, set out in paragraph a. is that the agency have a genuine need for the authority in question. The issue of need is to be approached by asking whether lack of law enforcement authority significantly hampers the agency's ability to perform an essential function within its jurisdiction. To answer this question, it is necessary to consider, first, the scope of the

agency's jurisdiction; second, the nature of its essential functions; and third, the effect of lack of criminal law enforcement powers on its ability to perform those functions.

As to the first of these considerations (the scope of the agency's jurisdiction), the mere existence of agency jurisdiction to enforce certain laws -- even if some of those laws carry criminal penalties -- does not by itself warrant granting the agency criminal law enforcement powers. Virtually all agencies have some form of criminal jurisdiction. In many instances, however, criminal sanctions have been provided for conduct that bears no resemblance to offenses within the traditional bounds of Anglo-American criminal law. In these instances, resort to the criminal enforcement process would usually be inappropriate. Moreover, even statutes that justifiably carry criminal penalties ordinarily provide civil or administrative sanctions, as well. With respect to these statutes, the better enforcement policy ordinarily is to rely on such non-criminal inducements to ensure compliance with the law, reserving criminal prosecution as a measure of last resort for the most serious cases.

The second consideration (the nature of the agency's essential functions), is closely related to the first. It involves an examination of the agency's responsibilities with respect to the matters within its jurisdiction. Those responsibilities may be purely administrative, or they may involve the performance of investigative, protective, or guard functions, as well. In these instances, it is necessary to determine whether performance of the function is essential, or only tangential, to accomplishment of the agency's mission.

Assuming that an agency has criminal enforcement jurisdiction, that a fair number of offenses within its jurisdiction warrant application of criminal sanctions, and that effective performance of the agency's mission requires that it take steps to prevent or detect such offenses, the final consideration to be weighed is whether the agency's lack of criminal law enforcement authority significantly hampers its ability to take these steps. This will depend, of course, on the nature of the steps to be taken and on the type of law enforcement power that is lacking. The absence of authority to execute a search warrant, for example, would not seem an impediment to an agency whose enforcement jurisdiction is limited to the performance of protective or guard functions. In short, an agency should not be given criminal law enforcement authority unless it can demonstrate that lack of authority significantly impairs its ability to discharge a function that is essential to the performance of its statutory responsibilities. If the agency can make such a demonstration, it will then be necessary to consider the remaining factors.

Paragraph b. of section 4 assumes that an agency has met the test of need described in paragraph a. and raises the question whether that need can be met effectively by assistance from a traditional law enforcement agency.

One such alternative approach, for example, might be to have the FBI or the Secret Service make an arrest on behalf of the agency. Another might be to confer temporary law enforcement authority on certain employees of the requesting agency by designating them special duty agents of the Department of Justice for a limited period. A number of factors should be considered in deciding whether such an alternative is preferable. Among these are the kind of assistance required; the length of time during which the assistance will be needed; the ability and willingness of traditional law enforcement agencies to provide the assistance in a timely manner, in light of the restrictions imposed upon them by their own statutory jurisdiction and responsibilities, enforcement priorities, and resources; and the legal basis for conferring special deputy agent status on employees of non-law enforcement agencies.

The provision of timely and effective support by a traditional law enforcement agency can best be assured by means of a Memorandum of Understanding. Typically, such a memorandum reflects an agreement between an agency lacking law enforcement authority and one having such authority concerning the circumstances and conditions under which the latter will render law enforcement assistance to the former. Only if a satisfactory Memorandum of Understanding cannot be arranged, and if no other method is available for ensuring timely and effective assistance from a traditional law enforcement agency, should a non-law enforcement agency be authorized to exercise law enforcement powers in aid of its mission.

Paragraph c. of section 4 specifies, as another prerequisite to granting an agency law enforcement authority, that adequate safeguards exist to ensure proper exercise of the authority by the agency. This requirement raises questions of training, supervision, and oversight in relation to the agency's ability to exercise the requested authority in a professional manner. As is made clear in the following specific guidelines, an agency must provide assurance that the employees who it permits to exercise law enforcement powers have received the training necessary to qualify them to exercise those powers properly. In addition, the agency must provide those employees with adequate supervision, pursuant to policies and procedures approved by the Attorney General, to prevent unauthorized use or misuse of authority. Finally, the agency's performance in exercising law enforcement authority should be subject to effective oversight within the Executive branch and by the appropriate committees of Congress. To facilitate such oversight, the agency should prepare annually a brief statistical summary of its use of the particular law enforcement powers it has been granted.

Paragraph d. of section 4 requires a judgement that the advantages attributable to the agency's possession of the authority can reasonably be expected to outweigh the disadvantages likely to be involved in the agency's exercise of

the authority. Foremost among the possible disadvantages to be considered in this balancing process are the risks of interference with the work of traditional law enforcement agencies. Such interference might occur as a result of the difficulties of coordinating the investigative activities of numerous agencies or as a result of inadvertent intrusion into the jurisdiction of traditional law enforcement agencies. It might take the form of conflicting undercover operations or the making of untimely or unlawful arrests or seizures that could prejudice other investigations or jeopardize prosecutions. Also to be considered under this heading is the danger that an agency's misuse of authority might lead Congress to restrict the exercise of such authority by traditional law enforcement agencies as well as by the agency at fault.

Monetary costs should be considered as well. These might include the expenses of additional training and equipment that would be incurred by the agency; the cost of providing early retirement and civil service benefits to a larger number of Federal law enforcement officers (to the extent that an obligation to provide such benefits would follow a grant of law enforcement authority); the waste of resources that would result from duplicative investigative capabilities and efforts; and the financial drain of having to defend, and pay judgments in, civil suits for misuse of law enforcement authority. The assessment of these costs must be predicated, of course, on reasonable approximations and estimates.

Finally, there is a category of potential disadvantages that, while difficult to quantify, nevertheless deserve consideration. Among these might be a slackening of the agency's non-criminal enforcement efforts, additional burdens for the Government under the Freedom of Information and Privacy Acts, and heightened concerns over interference with civil liberties as a result of proliferation of Federal agencies with law enforcement powers.

Against the potential disadvantages that may be involved in granting a particular type of law enforcement authority to a particular agency must be weighed the potential benefits in terms of the agency's enhanced ability to carry out its mission and the consequences of its improved performance for effective and efficient Federal law enforcement in general. The agency's performance might be improved as a result not only of its ability to exercise new powers but also as a consequence of its greater ability to attract and retain highly qualified employees by holding out to them the prospect of having the authority to perform their duties effectively. An additional benefit could be avoidance of the delays and drains on the resources of traditional law enforcement agencies that might result from relieving them of obligations to render assistance to other agencies.

3. Guidelines.

a. Authority to Carry a Firearm.

Of all the forms of law enforcement authority that may be conferred on a Federal agency, the authority to permit its employees to carry firearms has the greatest potential for serious harm to individuals and to the interests of the Government. Yet it is often essential to the effective performance of an employee's duties that he be allowed to exercise such authority. This guideline recognizes the need for Federal employees to carry firearms in certain situations, but at the same time establishes limiting criteria to ensure that the potential for harm is minimized.

The first of these criteria is the requirement that there be a significant likelihood that the agency personnel on whose behalf firearms authority is sought will, in the course of performing their assigned duties, confront situations in which the use of a firearm would be lawful. Thus, firearms authority should not be granted on the basis of a mere possibility that an employee may at some time in the course of his work find it comforting or even useful to have a gun. Such a loose standard would permit the arming of hundreds of employees who have no real need to carry weapons. Instead, there must be a substantial probability that the employee's work will place him in situations in which it is essential that he be armed and in which his use of a firearm would be lawful. Whether such situations are likely to arise in the course of an employee's duties will depend largely on the nature of the offenses he will be called upon to prevent or investigate, as well as on the types of offenders he can be expected to confront.

As a general matter, the carrying of a firearm would be warranted when: (i) the employee will be threatened with imminent death, serious bodily injury, or kidnapping; (ii) the employee will be required to prevent another person from causing imminent death or bodily injury to, or kidnapping of, a person who is under his protection; and (iii) the employee will be required to prevent imminent loss or destruction of property of substantial value that is under his protection.

Examples of situations that would meet these requirements are: (i) when the employee's duties require him to make arrests or execute search warrants; (ii) when the employee is assigned to protect another person who there is reason to believe may be subjected to acts or threats of violence; and (iii) when the employee's job is to protect property of substantial value which there is reason to believe may be the subject of attempted theft or destruction. A greater severity of potential bodily injury is necessary to justify the carrying of a weapon for self-protection (serious bodily injury) than is needed to warrant the carrying of a firearm to protect others (any degree of bodily injury). This

distinction is made because an employee's statutory duty to protect others requires that he safeguard them from attempts to inflict any kind of physical injury, whereas his use of deadly force for self-protection is warranted only when he is threatened with serious bodily injury.

Subparagraph (1)(iii) of section 5a. covers only situations in which there is no reason to anticipate danger to the employee himself or to a person under his protection. Ordinarily, the law does not permit the use of a firearm for the sole purpose of protecting property. In some situations, however, the extraordinary value of the property to be protected may justify the carrying of a firearm. How valuable the property must be to warrant armed protection cannot be specified in precise terms. Although some property may not have great intrinsic value, its loss or destruction could nevertheless have very serious consequences. Certainly, an appropriate measure of value should encompass property the loss or destruction of which would cause substantial damage to a vital interest of the United States. For example, protection of property essential to maintaining national security, or to ensuring the uninterrupted flow of energy or communications, would warrant the carrying of firearms, even if persons are not likely to be injured directly by threats to such property. Of course, if the value of the property is such that the law does not permit deadly force to be used to protect it, an employee responsible for safeguarding the property should not be authorized to carry a firearm.

Paragraph (2) of section 5a. requires the exploration of possible alternatives before an agency is authorized to permit its employees to carry firearms. Only if it appears unlikely that timely and effective assistance will be available from another agency should such authority be granted. Ordinarily, it will be impractical to seek outside assistance if the employee works in a remote area, if communication is difficult for other reasons, or if the need for a weapon arises unexpectedly. On the other hand, if the danger can be anticipated and met effectively by assigning an employee with arms-carrying authority to accompany the employee who lacks such authority, that course should be preferred.

The third requirement of section 5a., set forth in paragraph (3), is that the employee who is to be authorized to carry a firearm must have completed an accredited course of training in the carrying and use of firearms and must be currently qualified in their use. The purpose of this requirement is to ensure not only that employees possess the technical expertise to handle firearms safely and effectively, but also that they have the ability to exercise sound judgment regarding the circumstances under which it is appropriate to use their weapons. The first part of this requirement could be met by completion of the appropriate courses at the FBI's training facility at Quantico, Virginia, the Federal Law Enforcement Training Center at Glynco, Georgia, or the equivalent which provides necessary knowledge or competency.

The second part of the requirement mandates periodic reevaluation of the employee's ability to exercise discretion in the use of firearms and periodic review, by means of firing range examinations, of his proficiency in the use of the particular type of firearm he is authorized to carry.

As a final safeguard against unauthorized use or misuse of arms carrying authority, paragraph (4) requires that the agency agree to establish policies and procedures, acceptable to the Attorney General, to govern the manner in which such authority is assigned and exercised within the agency, and to ensure the accountability of individual employees and their superiors for the proper use of such authority. These policies and procedures should include a requirement that an individual's authority to carry a firearm be approved on a case-by-case basis by a designated senior official of the agency.

b. Authority to Seek and Execute an Arrest or Search Warrant.

The authority to seek and execute arrest and search warrants, covered by section 5b. is not a general authority to arrest and search for evidence relating to any type of offense. Rather, the powers referred to cover only offenses over which the agency has jurisdiction and offenses involving resistance to an employee's authority (e.g., assaulting the employee to prevent him from exercising his authority to execute a search or serve a subpoena). An additional limitation, signalled by the reference to section 5f., is that the search warrant authority referred to does not include power to seek authorization for, or to engage in, any type of electronic surveillance. This authority is treated separately, along with other covert investigative techniques (e.g., engaging in undercover operations and using paid informants), the exercise of which requires particular care and supervision.

Regarding the necessity for conducting searches, one factor to be considered is whether an alternative method, such as the use of a subpoena, is available and would be equally effective. Another consideration is whether, if the agency already has administrative subpoena power, any additional search warrant authority is needed.

Paragraphs (2), (3), and (4) involve essentially the same considerations as the counterpart requirements for obtaining authority to carry firearms. With reference to paragraph (2), as it relates to search warrant authority, additional factors to be considered are the location of the search, the nature of the items to be seized, the need for special expertise in identifying those items, and the amount of time that will be needed to complete the search.

c. Authority to Make a Warrantless Arrest.

Unlike section 5b., which limits arrest and search warrant authority to offenses within the agency's jurisdiction and offenses involving resistance to an employee's authority, section 5c. deals with broader authority to make warrantless arrests for any offenses committed in the employee's presence or for felonies committed outside his presence for which there is probable cause to arrest. Thus, in addition to permitting a warrantless arrest for an offense over which the agency has jurisdiction and an offense involving resistance to the agent's authority, section 5c. provides a foundation for the warrantless arrest of a person who the employee has probable cause to believe has committed a felony under Federal or State law, as well as a person who, in the employee's presence, commits a misdemeanor in violation of Federal or State law. This provision recognizes the desirability of permitting a Federal employee in an emergency situation to exercise common law arrest power. Explicit recognition of Federal arrest authority in emergency situations involving violations of State law should serve to protect Federal employees against uncertainties concerning their authority that might arise under State laws governing citizens' arrests.

Like the authority to carry a firearm and the power to seek and execute arrest and search warrants, authority to make warrantless arrests should not be granted merely on the basis of convenience or speculative need. Instead, before an agency should be authorized to permit its employees to make warrantless arrests, it should make a convincing showing that, in the course of their duties, its employees can frequently be expected to encounter situations that present a need to arrest offenders promptly rather than waiting until warrants have been obtained. Examples of sufficiently exigent circumstances are situations in which the offense threatens immediate injury to persons or property, situations in which delay might reasonably be expected to permit the offender to escape, commit additional offenses, or destroy evidence, and situations in which the offense threatens to thwart the employee in carrying out his duty. If the agent is authorized under this guideline to make a warrantless arrest, he may also, of course, conduct a warrantless search incident to arrest.

Whether another agency can be relied upon to make the arrest depends on the same factors that determine whether the arrest must be made promptly, as well as on the availability of personnel from the other agency and the time it would take them to provide assistance.

Required safeguards against unlawful or inappropriate use of arrest authority (i.e., training, supervision, and oversight), backed up by approved policies and procedures are similar to those applicable to the carrying of firearms.

d. Authority to Serve a Grand Jury Subpoena or Other Legal Process.

Whereas authority to carry firearms, make arrests, and conduct searches should be granted only in response to a need that cannot be met by calling on another agency, power to serve a grand jury subpoena or other process may be conferred on the basis of a less rigorous standard: when there is a need that can be met more conveniently or expeditiously by the employee than by personnel of another agency. Factors bearing on the application of this guideline include the probable effectiveness of an administrative subpoena (if the agency has authority to issue such subpoenas), time constraints, familiarity of the employee with the appearance and likely whereabouts of the person to be served, and any difficulties that might be anticipated in making service. In connection with this last factor, if there is reason to believe that the employee may be placed in danger in the course of attempting to make service, and if the employee is not authorized to carry a firearm, assistance should be sought from an agency whose personnel do have firearms authority. Considerations relevant to the requirements set forth in paragraphs (3) and (4) are similar to those discussed above in connection with the same requirements with respect to other types of authority.

e. Authority to Administer an Oath or Affirmation.

Unlike the other authorities discussed above that should not be conferred except out of necessity, authority to administer oaths and affirmations may be granted when it is either necessary or desirable that the employee take a statement or testimony that is sworn, or formally affirmed, to be true. Greater latitude is permitted here, because exercise of the power is not likely to be intrusive or to have harmful consequences, and because of the difficulty of making a determination that administration of an oath or its equivalent is necessary in order to ensure that the person being questioned responds fully and truthfully.

In other respects, the requirements of this guideline are essentially the same as the corresponding requirements in the preceding guidelines, except that the employee's training need not have been acquired through an accredited course of training. In light of the lesser risk of harm from misuse of this authority, less formal training is acceptable as a basis for permitting employees to administer oaths and affirmations.

f. Authority to Use a Covert Investigative Technique.

The use of covert investigative techniques is often a necessary part of the process of Federal law enforcement, particularly with respect to offenses that, unlike common law crimes, are committed in secrecy or are readily concealed. On the other hand, because these techniques involve secrecy on the part of the Government, they are often perceived as subject to abuse. Moreover, when

abuses do occur, they frequently threaten fundamental rights and invariably jeopardize the Government's investigation or prosecution. For these reasons, an agency should not be authorized to permit its employees to employ these techniques except under the most compelling circumstances and with the strongest possible guarantees against misuse.

With respect to each technique, the essential questions bearing on agency authorization are whether fulfillment of the agency's mission is likely to require regular use of the technique; whether, for reasons of economy, effectiveness, or otherwise, it would be preferable to rely on an agency with established expertise in the use of the technique; and whether the agency's policies and practices governing the use of the technique, as well as the training of its employees, give satisfactory assurance both that the technique will not be abused and that the appearance of abuse will be avoided. As an additional safeguard, the agency's policies and practices regarding the use of covert investigative techniques should require that the use such techniques be approved on a case-by-case basis by a designated senior official of the agency. Such high level approval is desirable because, as noted above, the use of these techniques is often subject to criticism and carries unusual potential for causing grave harm to individuals a well as to Federal law enforcement interests.

It should be noted that section 5f. does not address the technique of attempting to secure cooperation by promising a potential witness that he will not be prosecuted or that he will not be prosecuted fully, by promising a favorable sentencing recommendation, by offering him participation in the Witness Protection Program of the U.S. Marshals Service, or by holding out to him the prospect of a similar benefit. Appropriate use of such promises requires careful consideration of a number of factors including the degree of the potential witness's complicity relative to others involved in the case and the value of his cooperation in light of the requirements for successful prosecution. Ordinarily, the prosecutor rather than the investigator is in the best position to assess these factors and determine whether a promise is warranted. Accordingly, Federal investigators should not be given independent authority to make such promises in return for cooperation. This does not mean, of course, that an employee may not make such an offer when specifically authorized by the prosecutor.

Question 12. In response to a question during the hearing, it was indicated that police officers working at the National Zoo in Washington, D.C. receive a base starting salary of $19,000+ per annum. Please provide starting salary information for other special Federal police officers.

Answer. In 1981 a joint study group headed by the OPM Office of Compensation addressed the disparity in police compensation among Federal agencies and the resulting turnover and cost effects. A copy of the study group's findings in this particular area is attached. Briefly, the study shows that six Federal agencies with special, legislated compensation systems have turnover rates of less than 10 percent and that the Veterans Administration has the highest turnover rate among eighteen Federal agencies studied. In addition to the National Zoo police, starting salaries for the police of other Federal agencies are:

Library of Congress	$17,138
U.S. Capitol Police	17,404
Park Police	19,536
Supreme Court	17,404
Uniformed Division of Secret Service	19,182
U.S. Postal Service Security Police (Chicago area)	20,691
U.S. Postal Service Security Police (Los Angeles area)	21,387

PROTECTIVE OCCUPATIONS STUDY

PART II

POLICE AND GUARDS

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SECTION 4

Issue: Police Officer Personnel Management Problems

Police officer personnel management problems are typically present to a significant degree in forces paid under the General Schedule and absent in forces with special compensation systems. First and foremost of the General Schedule police force personnel management problems is what agencies view as excessive turnover/vacancy rates.

The Federal Aviation Administration (FAA) reported that its airports (Dulles and National) have had difficulty attracting an adequate number of qualified personnel and that this, in turn, has caused staffing problems aggravated by excessive turnover. The airports employ about 150 officers and on average have lost about 29 officers per year over the last several years. This turnover rate of 20 percent is excessive. Of these 29 per year, the airports lose an average of six police officers due to normal attrition (retirements, terminations, etc.). This loss rate of four percent would be low, but they also lose an average of 23 officers each year for employment elsewhere, mostly to Federal police forces with special compensation systems, and state and local jurisdictions. This employee turnover problem is having an "adverse impact upon the efficient management, operation and maintenance of adequate police services" at the airports, and airport security management blames it almost exclusively on compensation. In interviews by the study team with police officers at National and Dulles airports, virtually all of the younger officers said that they were actively looking for other jobs and would undoubtedly accept a higher paying job if offered. At the same time, these officers expressed basic satisfaction with the work of the organization and indicated a willingness and a desire to stay with FAA if their pay were closer to comparability with other police forces.

The General Services Administration (GSA), with an authorized strength of over 3,000 officers, also reported excessive turnover/vacancy rates in all of its regions, with turnover as the greater problem. The calendar year 1979 separation rate nationwide was 17 percent. In region ten, Seattle, the rate was over 50 percent. The worst aspect of GSA's turnover problem, beyond the administrative costs of recruiting, processing and initial training of replacements, is that they tend to "lose their best people", particularly those in the 21-30 age group, and this is viewed as detrimental to the quality of protective services provided. Officers go to more lucrative jobs in municipal, county and state police organizations; to higher paying Federal blue collar jobs; and to Federal police forces with special compensation systems.

The Veterans Administration showed a 71 percent turnover rate nationally for the period of October 1977 through December 1979, while the Department of Defense had a 17.6 percent "voluntary" loss rate in fiscal year 1979. Finally, the American Federation of Government Employees expressed the view that pay is not adequate nor equitable for General Schedule police officers and that excessive turnover is the result. Indeed almost all General Schedule agencies and employee organizations contacted in this study considered police turnover as a serious, if not critical, problem.

Conversely, the higher paying, special compensation Federal police forces did not even report a turnover problem, let alone one of serious impact. The Library of Congress reported a turnover rate of 7.5 percent yearly for its force. (Prior to establishment of a level equivalent to GS-7 as the journeyman grade in 1973, the turnover rate was running between 14 percent and 18 percent annually.) The Uniformed Division of Secret Service reported a turnover rate of about 8 to 9 percent, and turnover rates at the Supreme Court and on the Capitol Police were also at low levels.

Figure 9 lists General Schedule agencies and special compensation police forces personally visited by members of the study team, and shows which of them reported serious (in their view) turnover/vacancy rates.

Figure 9

Agency Visited	Turnover/Vacancies Viewed by Agency as Serious (Yes or No)		1979 Rate	Size of Force
Bureau of the Mint	No		11%	188
Federal Protective Service (GSA)	Yes		17%	2,970
Federal Aviation Administration	Yes		20%	150
Department of Defense (Department-wide)	Yes		17.6%	1,919
Bureau of Engraving and Printing	Yes		15%	186
Treasury Security Force	Yes		Unreported	56
National Institutes of Health	Yes		20%	15
Veterans Administration (Agency-wide)	Yes		29%	1,686
Patuxent River Naval Air Station	Yes		20%	40
Government Printing Office	No		Unreported	54
U.S. Naval Academy	Yes		25%	30
Veterans Administration (Richmond, VA.)	Yes		50%	8
Library of Congress*	No		7.5%	181
National Zoo*	No	less than	10%	25
Capitol Police*	No	less than	10%	1,167
Park Police*	No	less than	10%	557
Uniformed Division*	No		8.5%	812
Supreme Court*	No	less than	10%	75

*Denotes special compensation system in effect for police officers.

This figure and the preceding discussion illustrate two facts uncovered during on-site visits by the study team:

(1) Police compensation under the General Schedule is not viewed as adequate to retain personnel; and

(2) Compensation higher than that provided at grade GS-5 has proven, at least on a limited scale, to keep journeyman officers.

On the other hand, it must be noted that factfinding by the study team has uncovered other, noncompensation problems which apparently lead to turnover. For example, one large agency whose officers are paid under the General Schedule has serious internal management problems in that goals and methods of security/law enforcement vary from area to area. Also, the agency as a entity is still experiencing an identity crisis of sorts on its basic protective role: Should it be security oriented or law enforcement oriented? Although much is being done to solve these problems, they exist nonetheless and have an adverse impact on morale, which, in turn, contributes to turnover. Other General Schedule agencies/activities have restrictions on firearms, hot pursuit, and similar policies which "turn off" their officers. Similarly, one activity protective manager described his police force's work as "mostly guard work" and "quite boring." Certainly, these kinds of nonpay problems lead to loss of personnel. So, it must be concluded that compensation is a big problem, but not the only problem, for the General Schedule police forces. Since this compensation problem cannot be totally isolated from other problems, the weight of its impact alone on retention and mission accomplishment is not, and cannot be, fully known. What cannot be disputed, however, is that the rates of turnover are not only disruptive to the mission but quite costly. Figure 10 charts police officer turnover-cost relationships for FAA, VA, and GSA.

Figure 10: Cost Impact of Turnover in Selected Agencies

Cost Category	VA (FY 80)	FAA (FY 79)	GSA (FY 80)
a. Annual Turnover (number of officers)	648	29	306
b. Training Investment (number of officers lost x cost of training, tuition, transportation, per diem, etc., per officer: VA = 1 week in-house; FAA = 4 weeks in-house and 8 weeks FLETC; GSA = 8 weeks FLETC)	$291,600	$ 51,620	$ 975,700
c. Cost of Training Replacements (same cost as b)	$291,600	$ 51,620	$ 975,700
d. Total Training Cost of Turnover	$583,200	$103,240	$1,951,400
e. Cost of Turnover in Training Time Away from Job (Down-Time in Salaries Paid)	$315,900	$ 75,255	$1,323,696
f. Total Training Cost plus Down-time Cost of Turnover	$899,100	$178,495	$3,275,096
g. Uniform/Equipment Costs	$161,352	$ 29,000	$ 204,618
h. Cost of Background Check	Not Avail.	$ 27,550	$ 482,600
i. Total Turnover Cost (f+g+h)	$1,060,452	$235,045	$3,962,314
j. Annual Cost of Centrally Dispatched Investigative/ Inspective Assistance due to Insufficiently Trained/ Experienced Local Officers	$ 50,000	Not Applicable	Not Applicable
k. Grand Total Annual Cost Impact of Turnover	$1,110,452	$235,045	$3,962,314

NOTE: Several costs, including salaries of in-house instructors, facilities and materials, administrative costs of recruiting and personnel processing, etc., are not depicted; figures are either not available or not deemed accurate enough to present. GSA estimates that another $4 million plus is spent on overtime to carry out the work of personnel not available due to training or vacancies.

If compensation under the General Schedule is too low to retain police officers and this turnover is, in turn, costly and disruptive to mission accomplishment, the questions of "why" compensation is too low and "how" the situation may be corrected logically result. Section 5 addresses these questions by examining the current GS-083 classification standard, the relative value of police work vis a vis other occupations, and current job evaluation methods and systems.

Question 13. Can you tell us how long ago OPM issued the standards which place police officers in grades GS-4 and 5? Don't many modern police forces require college training in a related field, as well as providing intensive training as long as six months?

Answer. The OPM Position-Classification Standard for the Police Series, GS-083 which is currently in use has a publication date of August 1974. Although many advanced police departments at the state, municipal and county levels place a high value on college training among applicants and offer premium pay and tuition assistance to on-board police officers who pursue college courses, few police departments actually require college degrees for entry. Basic police recruit training in the majority of governmental jurisdictions is from four to six months in length. We believe that the training of police officers is very important but should be geared to the actual needs of the employing agency. VA police officer minimum entry qualifications require two years prior experience as a police officer with a governmental agency or the completion of a two year college program in law enforcement, criminology, or police administration. In view of these entry level requirements for police knowledge, skills and abilities, it remains our task to provide police officers with the training for a smooth transition to VA's internal policies and procedures.

Hon. John Paul Hammerschmidt to Veterans' Administration

Question 1. In your statement, you say, "If VA is required to fill privately written prescriptions for all veterans for compensable rated service connected disabilities, it would seem logical to also provide those veterans with other services ordered by private physicians, such as x-rays, laboratory studies and other diagnostic tests." What is your current policy in this area if such services are requested by a fee basis doctor treating a service connected veteran who had a fee basis card? In this connection, I am assuming that the fee basis doctor would not have the capacity to take x-rays, do lab work or diagnostic testing.

Answer. The authority for fee-basis treatment carries with it the authority for the treating physician to refer veterans to non-VA sources for supportive medical services that he/she prescribes. The costs for these services are included in the monthly maximum amount authorized for the total fee-basis treatment program of the veteran. This policy is based on the same premise that the overall fee treatment program is approved for the veteran, i.e., geographic inaccessibility to care in a VA health care facility. If a fee-basis physician requests the VA to provide laboratory studies, x-rays or other services, the request would be honored. However, it could indicate that geographic inaccessibility may not exist and the fee authority may be rescinded and the veteran instructed to obtain staff treatment at the appropriate VA health care facility.

Question 2. In answer to a question, the General Counsel inquired of you if a distinction was made before the legal issue arose as to whether these private prescriptions were for service connected or non-service connected conditions. Your answer was, "There was not." Wouldn't a review take place prior to filling such prescriptions? Would not a typical VA Medical Center handle such reviews in much the same way that they handle bills for private pharmacies prior to paying them or for that matter from fee basis doctors?

Answer. No VA policy had been published on this issue, thus, no specific requirements had been mandated. In many cases prescriptions were for veterans entitled to medical services for any condition. There was no useful purpose served by trying to determine what disability the medications were prescribed to treat. In addition, there was no policy mandated that required that the service-connected disability be compensable, so we did not have to check on that item.

Question 3. By your testimony do you mean to state that the VA was paying out $7 million a year for these type prescriptions before the legal issue arose or do you mean that a legislated entitlement would create a new cost over and above what was previously spent or is it a combination of the two?

Answer. We estimate that the cost of implementing H.R. 3876 would be approximately $6.4 million per year. That dollar estimate is based on an estimate of the number of service-connected veterans for whom we believe prescriptions were being filled prior to issuance of the legal opinion disallowing the provision of such prescriptions. Since those prescriptions are not now being filled by the VA, and have not been for sometime, the $6.4 million will be additional costs to the VA.

Question 4. If, for whatever reason, a qualified fee basis doctor had his treatment bill paid by a qualified veteran authorized to receive fee treatment for a service connected veteran instead of the doctor billing the VA, would VA fill the proper prescription of that doctor?

Answer. The prescription would be filled if the fee-basis treatment, at VA expense, has been authorized in advance.

Question 5. Testimony was received that if a law is passed to erase the legal issue, VA would be required to be certain that prescriptions coming in were for service connected conditions. Several field station Directors have indicated that their Medical Centers made such reviews under the old policy. In view of this, would you still feel that such reviews would be "administered add-on" and add to VA's cost.

Answer. Yes, we believe such reviews would add to the cost. As noted previously, reviews were limited in the past in that many prescriptions were filled for veterans who were eligible for medical services for any disability. A review of these cases would have been non-productive. Under H.R. 3876, every prescription would require review to assure that it is for a service-connected disability, and, that in addition, the disability is compensable.

Question 6. You infer in your answer to questions that this issue involves "mainstreaming" because the service connected veteran decides to pay his own doctor bill but then asks VA to furnish his prescriptions. Do you make a significant distinction between the veteran deciding and you deciding? Doesn't the fact that VA would make the decision as to whether or not to furnish medicine really mean that VA and not the veteran decides?

Answer. A veteran requiring treatment decides how he wishes to obtain his care. If legal eligibility exists and VA facilities are geographically inaccessible, treatment may be authorized at VA expense by an appropriate non-VA physician if the veteran desires this and requests if from the VA. If the veteran decides not to request VA authorization for treatment for one reason or another, or is not eligible for it, he/she may elect to pay for his/her own treatment costs. Except for those included in 38 USC 612(h), medications would not be provided in this latter situation since the VA cannot control treatment and quality of care when providing medication only. The decision on what treatment is best for a veteran should be made by a VA physician or one under contract with the VA. This provides controls, in either case, in assuring that the treatment a veteran receives is that which the VA prescribes and for which responsibility can be accepted.

Question 7. Because money actually controls, does not the current policy deny a benefit to service connected veterans to the benefit of the non-service connected?

Answer. The current policy provides the same benefit to the service-connected veteran receiving increased compensation by reason of being permanently housebound or in need of regular aid and attendance as it does for the nonservice-connected veteran receiving increased pension for the same reason.

Question 8. You testified that one of your main objections to H.R. 3876 is that you have no control and that you have no knowledge of what the prescription is for. Couldn't you establish control by relating the prescription to the service connected condition and by appropriate contact with the private doctor?

Answer. Any controls of this nature would not only be costly but excessively time consuming. On the other hand, where fee-basis care is involved, the treating physician accepting the veteran for care at VA expense is performing a contractual-type service for the VA. He/she is aware of the disabilities for which care is authorized by the VA. This provides certain controls necessary for the program that are not available under H.R. 3876, or if established would be costly.

Question 9. Did DM&S express concern when the "white paper" legal opinion was first drafted and did DM&S want to continue the furnishing of drugs and medicines to these service connected veterans as it had in the past.

Answer. When the "white paper" legal opinion was made available, we recognized the need to publish the information for the guidance of everyone. We were compelled to advise our health care facilities that what had previously been considered by many of them as a medical benefit that should be made available to several categories of veterans, was in fact a benefit to which only a limited number of veterans were entitled. The only policy existing at this time was the specific issue of 38 USC

612(h). We had published nothing on the broader issue of filling prescriptions for any other category of veteran.

TESTIMONY OF PAUL W. SCHAFER, M.D., EXECUTIVE DIRECTOR, NATIONAL ASSOCIATION OF VA PHYSICIANS

H.R. 4792. A preliminary survey of our membership does not allow me to speak with a clear voice on this substantial proposal to create a Special Veterans Police Force within Title 38. This matter has been placed on the agenda of the next monthly meeting of the National Association of VA Physicians Board of Directors and on the quarterly meeting of NAVAP District Directors which will occur on Friday and Saturday next, respectively on March 9 and March 10. I request the opportunity to furnish the Committee a written report of the actions taken at these two meetings.

H.R. 4625. It is my understanding that this Bill provides a needed 15 day grace period for the Comptroller General to file a Report concerning the Director of the Office of Management and Budget's compliance with his requirement to provide the Veterans Administration its funded personnel ceiling.

We obviously support the careful monitoring of this Administration Official's actions since he has now publicly targeted the Veterans Medical Program as one of his prime areas for budget cutting during the effort to reduce the staggering federal deficit.

H.R. 3876 provides statutory authority for VAMC Pharmacy Services to do what many of them have been doing for years; namely, providing drugs and medicines to service-connected veterans who are not on staff or fee basis treatment. It is my understanding that about six months ago a Central Office directive terminated this practice. At least at the Washington, D.C. VAMC this resulted in a Medical Administrative Service letter of notification to such veterans that only one more prescription would be filled without the veteran being seen by a VA Outpatient physician who would then be required to rewrite the prescription, if indeed it seemed to be indicated. I am advised that no workload or budgetary impact of this change has been noted by the Pharmacy Service but that it has increased Outpatient physician and administrative workload. It is certainly suggested that service connected veterans' needs might be better and more conveniently served by return to prior practice such as is provided by this proposed legislation.

H.R. 4694 represents the basis for continuation of the now-expired provisions of the Civil Service Reform Act of 1978 to provide that the Administrator may authorize an exception to existing Title 5 restrictions that require mandatory reductions in military retirement pay of certain retired military officers if necessary to recruit a well qualified doctor of medicine or osteopathy for a DM&S position which otherwise cannot readily be filled.

The main thrust of this proposed legislation is such that it guarantees support by the National Association of VA Physicians. The NAVAP Charter defines the organization's purpose to be the preservation and strengthening of the Veterans Medical Program and to insure it being served by physicians of the highest caliber.

NAVAP has consistently represented that the Agency has a chronic recruitment and retention problem in respect to first-class physicians. It has been shown repeatedly that VA physicians' income is substantially inferior to that of physicians in the private sector, academic and otherwise. Income disparity is the largest causative factor producing this indolent cancer threatening the Veterans Medical Program.

On December 28, 1981 former VA Administrator Robert P. Nimmo, promulgated an infamous order reducing VA physicians' Special Incentive Pay by $4,982 per year. This arbitrary and capricious action was justified by the erroneous representation that the Agency did not have a substantial physician recruitment and retention problem requiring the Special Incentive Pay authorized by PL 96–330. You will recall that this law came into being by override of then-President Carter's veto on August 26, 1980 by a vote of 401 to 5 in the House and by an historic 85 to 0 vote in the Senate, only the fourth time in the history of the Republic such a unanimous Senate override occurred. NAVAP tried unsuccessfully to obtain judicial relief from this irrational position in which the Agency finds itself as a result of the action of an Administrator who left the Washington scene after other much publicized aberrant behavior. The Nimmo Legacy is that VA physicians have to date suffered a $7,293 loss of income which continues to increase at the rate of $2,682 per year.

We respectfully represent that the Agency's first-class physician recruitment and retention problem would be more meaningfully addressed by immediate cancellation

of the Special Incentive Pay reduction schedule which was published on December 9, 1982.

We respectfully request that the Committee advise Administrator, Harry N. Walters to take this meritorious action. For the Veterans Medical Program to provide first quality health care to sick and injured veterans no impediments should be allowed to stand in the way of the Agency's efforts to staff the Program with the most competent health professionals it can obtain. How a Nation honors its contract with the men and women who have served in its Armed Forces is a measure of its destiny.

NATIONAL ASSOCIATION OF VA PHYSICIANS,
Bethesda, Md., March 12, 1984.

Hon. ROBERT W. EDGAR,
Chairman, Committee on Veteran's Affairs,
Subcommittee on Hospitals and Health Care, Washington, D.C.

DEAR MR. CHAIRMAN: As promised in my testimony before your Subcommittee on Wednesday last, H.R. 4792 was discussed at length during the March 10 quarterly meeting of NAVAP National Officers and District Directors.

I must inform you that the National Association of VA Physicians does not support this proposed legislation.

Very Sincerely Yours,

PAUL W. SCHAFER, M.D., *Executive Director.*

STATEMENT OF DAVID W. GORMAN, ASSOCIATE DEPUTY NATIONAL LEGISLATIVE DIRECTOR, DISABLED AMERICAN VETERANS

Mr. Chairman and members of the subcommittee, on behalf of the more than 849,000 members of the Disabled American Veterans, I want to thank you and the members of the Subcommittee for allowing us this opportunity to relate our views on various bills pertaining to the Veterans Administration health care system.

H.R. 3876

Introduced on September 13, 1983 by a distinguished member of the Subcommittee, Mr. Mica, this measure proposes, through appropriate amendment of Title 38, United States Code, to authorize the Veterans Administration to furnish each veteran with a compensable service-connected disability, such drugs and medicines as may be prescribed by any licensed physician for treatment of the service-connected disability.

Mr. Chairman, as you are well aware, a recent VA General Counsel opinion has held that Section 612(h), Title 38, United States Code is the exclusive legal authority for the VA to fill prescriptions written by private, non-VA physicians.

This opinion was rendered following a request by the Chief Medical Director that the General Counsel reconsider a position that had previously been taken on the same question. The recently published General Counsel opinion simply affirms the previously held conclusion.

According to the General Counsel, only veterans receiving authorized fee-basis care, receiving increased compensation or pension benefits predicated on the VA's findings that they are permanently housebound or in need of regular aid and attendence are eligible to have such prescriptions filled by the VA Pharmacy Service.

The General Counsel concluded that there exists no legal authority that would permit the VA to fill such prescriptions for any other category of veterans, including service-connected disabled veterans, who are otherwise entitled to the full array of outpatient medical services.

The conclusion reached and its subsequent implementation by all VA medical care facilities has unquestionably produced a major disruption of medical treatment in the lives of countless service-connected disabled veterans.

We view this administrative decision as very unfortunate, as it has effectively terminated a long-standing practice and policy at many VA medical facilities.

Also, we wish to point out that there are various factors to this issue that produce "ripple effects" for both the veteran and the Administration, such as: cost-effectiveness, increased workload, and significant difficulty for veterans.

Mr. Chairman, the issue of cost-effectiveness is very real. Filling prescriptions by mail or through direct veteran contact with a VA pharmacy acids the necessity of occupying the valuable time of various VA medical facility personnel in scheduling

appointments, pulling and routing medical records and providing beneficiary travel pay. Similarly, there will be an increased workload placed on already overburdened VA physicians.

In a medical care system that will experience a total of nearly 17 million staff outpatient medical visits in Fiscal Year 1985 (79,000 visits over Fiscal Year 1984) and will do so with a meager increase in the number of physicians and support personnel, we find it both ironic and impractical to require—actually encourage—a significantly large influx of additional veterans to come into the system.

Also, we wish to remind the Subcommittee that a large number of veterans, many with seriously disabling conditions, but who do not have eligibility for fee-basis care, find it difficult or sometimes impossible to receive direct VA care. I refer, of course, to veterans afflicted with such disabilities as amputation, chronic back disorders or severe neurological conditions, to name only a few.

We recognize that additional controls may be necessary to insure that various drugs and medicines are not prescribed in an haphazard manner or that such prescriptions are not contraindicated for other drugs prescribed for other diseases or disabilities. Nevertheless, Mr. Chairman, for the reasons previously mentioned, and so long as proper medical and administrative monitoring is initiated to assure that prescriptions are appropriate in terms of the service-connected disability being treated, we conclude that this legislation is reasonable and necessary. Moreover, we believe that the VA can curb the prescription of unneeded or contraindicated drugs and, at the same time, implement the necessary provisions contained in the pending legislation.

Accordingly, in concert with the goal of a resolution approved by the delegates to our most recent National Convention, the DAV supports the enactment of H.R. 3876.

H.R. 4625

The pending bill, introduced on Janaury 24, 1984 by you, Mr. Chairman, would, by appropriate amendment to Title 38, United States Code, clarify the time frame for submission of the Comptroller General's Report required by Section 5010, United States Code.

Currently, the Director of the Office of Management and Budget is required, with respect to each law authorizing appropriations for the Veterans Administration for any fiscal year (or any part of a fiscal year), to (1) provide to the VA such funded personnel ceiling and the funds necessary to achieve such ceiling; and (2) submit to the appropriate Committees of Congress and to the Comptroller General of the United States certification that the Director has provided such ceiling.

The Comptroller General then has 45 days after the enactment of each law to submit a report to the appropriate Congressional Committees setting forth an opinion as to whether the Director of the Office of Management and Budget has complied in providing such funded personnel ceilings.

The proposed measure simply clarifies that the Comptroller General Report shall be submitted not later than 15 days after the end of the period specified for the Director of the Office of Management and Budget to submit the required certification.

Mr. Chairman, the DAV has no official position on this proposed legislation, however, as it appears to place an additional degree of accountability upon the Office of Management and Budget, we favor its enactment into law.

H.R. 4694

This measure, introduced by you, Mr. Chairman, on January 31, 1984 would amend Title 38, United States Code, to authorize the Administrator of Veterans Affairs to waive mandatory reductions in military retired pay of certain retired military officers recruited for employment by the Department of Medicine and Surgery.

Mr. Chairman, the intended purpose of this bill seems clear—the recruitment of well qualified Doctors of Medicine or Osteopathy, who are military retirees, for positions which otherwise could not readily be filled by such physician without reduction or loss of military retirement or retainer pay.

The DAV has no official position on this bill, however, we do not object to its enactment, as employment of such individuals could only serve to enhance the type and quality of medical care provided to disabled veterans.

H.R. 4792

Introduced by you, Mr. Chairman, on February 8, 1984, H.R. 4792 would amend Title 38, United States Code, to clarify, among other things, the scope of authority of Veterans Administration Police Officers.

Mr. Chairman, as we view this measure, the Administrator would have the authority to prescribe regulations for the purpose of protecting persons and property, as well as maintaining law and order in buildings and land under the direct jurisdiction of the Veterans Administration.

By permitting the Administrator to appoint qualified VA police officers, as well as a Chief Inspector to supervise such officers, the VA's ability to provide a safe environment for its employees, veterans and visitors would be significantly strengthened.

Because these police officers shall be regarded as competitive service employees and placed in proper classes and grades, the ability to recruit and retain quality individual law enforcement officers would be enhanced.

However, the DAV has two concerns regarding the provisions of H.R. 4792 as currently constructed. First, the absence of language regarding an affirmative action plan for the hiring of qualified disabled veterans and veterans of the Vietnam Era.

Mr. Chairman, as it is the policy of the United States to promote maximum employment and job advancement opportunities within the federal government for qualified disabled veterans and veterans of the Vietnam Era, we suggest, should H.R. 4792 be favorably reported, that this policy be made a part of the accompanying report language.

Second, that provision of the bill which would provide the VA Administrator with the authority to ". . . authorize police officers to carry firearms while in the performance of their official duties" and "prescribe standards for the issuance and carrying of firearms by police officers."

While we have no specific objections to VA police officers carrying firearms, we are primarily concerned, as I am sure the Subcommittee is, with the safety of VA employees and veterans.

In this regard, it could prove catastrophic if an emotionally disturbed veteran's aberrant behavior were to be mistakenly interpreted (by a VA police officer) as criminal in nature, as opposed to simply a manifestation of the disability requiring medical treatment.

Therefore, we would strongly urge the Subcommittee, should H.R. 4792 be favorably reported, to include report language specifically requiring that all VA police officers receive specialized training and instruction in the management and handling of veterans in the hospital environment, especially the emotionally disturbed veteran.

This concludes my statement, Mr. Chairman, and I wish to again thank you and the members of the Subcommittee for allowing the DAV this opportunity to express our views on these important subjects.

STATEMENT OF PAUL S. EGAN, DEPUTY DIRECTOR, NATIONAL LEGISLATIVE COMMISSION AND ROBERT E. LYNGH, DIRECTOR, NATIONAL VETERANS AFFAIRS AND REHABILITATION COMMISSION, THE AMERICAN LEGION

Mr. Chairman and members of the subcommittee; the American Legion is pleased to have this opportunity to present its views on the matters scheduled for your consideration today.

We will comment on the four measures scheduled, specifically, HR 3876, HR 4625, HR 4694 and HR 4792.

H.R. 4792—Proposed amendments to title 38, United States Code, section 218, to clarify the scope of authority of VA police officers; to provide the Administrator with the authority to prescribe standards for VA police officer titles and grades; and introduces other significant changes relative to VA Security Service.

For several years, The American Legion has been intensely interested in the problems that continue to plague VA Security Service in the form of excessive turnover rates of personnel, ongoing recruitment and retention problems, and a host of other serious shortcomings that demand immediate correction. The expectation is that hospitals will provide a reasonably safe environment. It is the opinion of the American Legion that many VA facilities are not presently accomplishing this goal, and in the remainder, security is oftentimes deficient.

The Subcommittee is well aware of the alarming statistics that surround the system-wide Security Service, so we will not elaborate on these at this time. Suffice it to say that VA police officers are no longer just "door shakers" and escort personnel as many obviously still perceive them. Our Field Representatives consistently highlight serious problems at VA medical centers that are a direct result of inadequate stability within the security workforce. Our surveys confirm our contention that Security Service continues to deteriorate at an alarming rate. As our survey cycle starts its second course for this service. this fact has become all too evident.

Mr. Chairman, we would again like to outline some of the more serious problems as we see them. The obvious longstanding problems are, of course, inadequate salaries and the lack of upward mobility within the service. The vast majority of recruitment and retention problems stem from these two voids. Likewise, the excessive annual turnover rates for security personnel, some consistently at 100%, continue to disrupt operations and threaten the safety of patients, staff and visitors.

Responses to our field survey reports and the numerous letters of inquiry we have generated on this subject, continue to suggest future studies as the ultimate solution. The Legion would like to go on record with our opinion that this matter has been studied to death. The welfare of veterans, VA staff, and visitors, along with the need to safeguard the millions of dollars worth of government property against losses each year, can no longer be overlooked simply by pointing to ongoing and future studies as a viable solution.

The OPM occupational standards study of the Police Officer Classification Standard, currently underway, is a case in point. Although we were informed by VACO personnel that revised standards may be issued in early 1985 as a result of this study, we were more recently informed that this study has been suspended, indefinitely. It should be noted that this study could, in fact, ironically result in the downgrading of certain police officers at selected VA medical centers. Its indefinite suspension, therefore, is a barometer indicating the seriousness of the problem. Additionally, OPM personnel state completion of the study in early 1985 would mean it would be 1987 before any significant implementation could transpire.

We would also like to comment on another commonly heard solution to the recruitment and retention problem. Title 5 provides for special salary rate increases for recruitment problems of this nature, but this, in our opinion, is window dressing at best. The manpower needed for the enormous amount of required data collection, when coupled with the ludicrous turnaround times, always in excess of 1.5 years, results in VAMC Directors not even applying for the rate increases. Additionally, we would add that there are documented cases where special salary rate increases have been authorized, eventually eliminating recruitment problems, and then are withdrawn by OPM because recruitment problems suddenly do not exist any more. Catch-22 at its most classical manifestation. The logic behind this kind of thinking is not deserving of comment, except to mention the morale deterioration and ensuring problems that result from this action.

H.R. 4792 also addresses the issue of clothing allowance. This is a matter of utmost importance to the individual police officer in the field. There is very little opposition to this provision, even from OPM, yet this is still one of the major complaints our office receives from VA police officers. The American Legion strongly endorses an increase in the initial and annual clothing allowance provided to VA police officers as outlined in this bill.

Mr. Chairman, before we respond to an issue in this bill we disagree with, the training situation, or lack thereof, needs to be mentioned. It is our opinion, formed from information gathered through site visits, that the Little Rock training currently provided is grossly inadequate. There needs to be either an expansion of this training period, or implementation of alternative training, possibly in the form of periodic training sessions within each Medical Region.

The final proposal outlined in H.R. 4792 we will discuss, pertains to the issue of weapons for VA police officers. Admittedly, a problem exists in this regard and The American Legion recognizes it to be a severe one. However, we believe that firearms in a health care environment can only spell trouble for all concerned. Records reviewed show an annual average of 85 incidents involving the use of the non-lethal Chemical Irritant Projector (CIP) weapon. While we recognize the short-comings associated with the CIP weapon, such as its ineffectiveness on some individuals under the influence of alcohol and/or drugs, we also must weigh the consequences of utilization of a deadly weapon. There are those rare occasions where possession of a firearm would be warranted, but we believe that fundamentally it is the responsibility of local police and other Federal law enforcement agencies to assist VA in matters of this kind. We would suggest efforts be undertaken with these agencies to strengthen rapport levels and improve response times.

In conclusion, Mr. Chairman, we contend that certain aspects of H.R. 4792, if implemented, will certainly help to solve long-standing recruitment and retention problems and will ultimately stabilize VA security operations. As this Subcommittee knows, this is long overdue. The American Legion fully supports a system-wide increase in the grades and step levels at which VA police officers may be employed. We pledge our support to the proposed increase in clothing allowances and improved training methods. We also agree with the provision that increases the limitations on the Administrator's authority to affix penalties for violations of various regulations. We do, however, feel compelled to disagree with any provision that would allow VA police officers at VAMCs to carry firearms. Our analysis of this situation shows potential ramifications that far outweigh justification at this time.

Mr. Chairman, the three other measures under consideration today are all supported either in whole or part by The American Legion. The first of these, HR 3876, would permit service-connected veterans to secure prescriptions from non-VA physicians and have them filled by VA pharmacies. Until a recent VA General Counsel opinion, many service-connected veterans could and did avail themselves of non-VA prescribed, but VA supplied medicines.

The American Legion believes that the VA should control its benefit programs and thereby control expenditures for its programs. However, since nonservice-connected housebound beneficiaries in receipt of aid and attendance allowances may receive medications from VA, honoring prescriptions written by non-VA physicians, we have to view denial of the same benefit for service-connected veterans as inequitable. Moreover, a slight change in the legislation could be made which would both eliminate the inequity between nonservice and service-connected veterans while still allowing VA a measure of control over its drug expenditures. Such a change would simply authorize VA to periodically review records of veterans receiving prescriptions from non-VA physicians. This would allow VA to insure than non-VA physicians are not over prescribing drugs to veterans contrary to medical standards.

Another bill under consideration, HR 4694, would provide certain retired regular military officer physicians with an incentive to seek employment with the VA's Department of Medicine and Surgery (DM&S). This incentive would be provided if dual pay and dual employment restrictions in section 5532 (a), (b), and (c) of title 5, United States Code were waived. Since waiving of these restrictions would provide a greater income for retired military physicians, the incentive created would undoubtedly provide VA with a useful recruitment tool.

Finally, HR 4625 would make a technical correction in the time within which the Comptroller General must report on whether the Office of Management and Budget (OMB) has allocated funds sufficient for VA to maintain statutorily authorized personnel levels. The Legion has no objection to this change. In fact, this change may even make it easier for Congress to monitor OMB practices as they effect VA personnel levels.

Mr. Chairman, that concludes our statement.

TESTIMONY OF LT. COL. DAVID J. PASSAMANECK, USA RET., NATIONAL LEGISLATIVE DIRECTOR, AMVETS

AMVETS appreciates this opportunity to submit its views on the proposed legislation under consideration.

We favor enactment of H.R. 3876 but would urge deletion of the words, "and compensable in degree" and "conpensable" respectively from lines 5 and 7 of the bill. There is no reason why zero rated service connected veterans should still be required to obtain prescriptions from VA physicians for their service connected conditions.

H.R. 4625 is a technical amendemnt which we do not oppose.

We favor enactment of H.R. 4694 but note the continued inequity of penalizing regular retired officers in general by applying discriminating dual compensation limits when they are employed in civil service.

We favor H.R. 4792, but would require the Administrator to certify in each case in which a non-veteran is hired that no qualified veterans could be hired from among applicants after all reasonable efforts were put forth to recruit veteran law enforcement officers.

This concludes my testimony.

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